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UNIVERSITY OF ALBERTA

THE APPLICATION OF THE FAMILY SYSTEMS APPROACH IN THE SCHOOL SETTING

BY

CORINNE L. ECKERT

A THESIS
SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE
OF MASTER OF EDUCATION
IN
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DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

EDMONTON, ALBERTA
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ABSTRACT

In recent years there has been a shift in school counselling toward conceptualizing student problems within the context of the family system rather than adhering to the traditional linear or individual-oriented frameworks. This recent trend may have occurred as a response to the research which has been indicating a link between family dynamics and student behavior problems, or may be a result of counsellors not feeling totally effective with the use of purely linear methods of counselling. Although school counsellors seem to be preferring to look at the family system in helping their students, there has been little research conducted on this subject. The purpose of this study was to explore how school counsellors apply a family systems framework to their work with students. A sub-goal of the study was to identify the forms of interventions used by school counsellors within a family systems framework which appeared to have impact.

This was an exploratory, descriptive study which involved the sharing of experiences by school counsellors trained in family systems theory. Five school counsellors participated in a series of three group meetings in which they discussed their use of the family systems framework in their work. Each counsellor was asked to conceptualize four of her school cases within a family systems framework. They then participated in an individual interview in which they described some of these cases and the interventions which had been used.

Findings from the interview and group meeting data revealed that in the fifteen cases which were reported by the five counsellor participants, there were a total of one hundred and twenty-three interventions used. These interventions were clustered into fourteen categories, some of which were directly associated with family systems theory, and others which were not usually associated with this theory. Although the counsellor participants found it useful to conceptualize their cases within a family systems framework, they tended to integrate concepts and techniques from other theories which they found effective. It was also found that the counsellor participants perceived most of the identified interventions as having impact. The results of this study indicate that school counsellors can apply a family systems framework to their work with students without abandoning many of the concepts and techniques with which they have grown familiar. They also indicate that the use of this approach may be perceived as effective in the school setting.

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CHAPTER ONE

INTRODUCTION

As a school counsellor, I have come to believe that the emotional and behavioral problems that students experience are interactional in nature. As students exist and function in a variety of environments, or systems, so do their problems. When exploring a problem with a student, it soon becomes evident to me that the problem is part of a larger pattern of interactions which involves another member or members of one of the student's systems. That system may be the student's family, class, school, peers, or some other club or organization. It seems to me that rather than working with the student to change him/her it would be more effective to work towards changing the pattern of interactions of which the problem is a part, or changing the way the student relates to that system.

The basic unit within which a child functions is the family. It is the system in which a child's behavior patterns are formed and through which emotional needs are met. The belief on the part of myself and other counsellors with whom I have talked is that many cases involve a problem related to dysfunctional interactional patterns within the family. Therefore, it would be optimal to produce change within these familial patterns. The problem seems to be that without turning school counsellors into family therapists, how can we intervene effectively in student problems which are embedded in dysfunctional familial interactions?

During a university course I learned about a form of therapy called the family systems approach. This approach views problems within an interactional framework, specifically that of the family system. A problem is not seen as existing within one person, but as symptomatic of dysfunctional interactions within the family system. Family therapists at the Mental Research Institute of Palo Alto, California (Fisch, Weakland, & Segal, 1982) view the problem as arising out of normal everyday difficulties. Normally, these difficulties are handled appropriately, but sometimes if a difficulty is mishandled or it is not resolved because more of the same ineffective solution is applied, it escalates into a major problem (Fisch, Weakland, and Segal, 1982). Therefore, the focus of intervention is not to change the symptom-bearer, but rather to change the interactions within the family system. This model seemed to fit with how I was conceptualizing student problems within the school in which I was working. I then took a course to explore family systems theory on a more indepth basis to see how I could apply it in my work with students. The theory seemed to fit, but I was still unsure of how the techniques of a family systems model could be adapted to be applied within a school setting.

As school counsellors do not often have access to entire families, I wondered how they could apply a family systems model in their own work with students. I learned that although many family therapists work in a family systems framework involving the whole family, some work with only part of the family. Could school counsellors apply a family systems framework to make an impact on their students' problems if they worked with only a few, or even one member of the family? Another concern was if they could do this without changing their existing methods or beliefs drastically, and without becoming family therapists.

As I knew of other school counsellors who had received training in family systems theory and who strongly believed in it as a model for use in the schools, I decided to investigate their use of the family systems approach. It was decided that these counsellors would report on their own experiences with the use of a family systems framework in their work with students.

Purpose of the Study

The purpose of the study was to determine how school counsellors apply a family systems framework to their work with students. It was hoped that the reports of the counsellor experiences would provide a general model of how school counsellors use this framework. A specific sub-goal of this study was to determine the forms of interventions used by school counsellors within a family systems framework which appeared to have impact. Although there are a variety of models which exist within family systems theory, the focus was not to single out any one of these, but to gather information on the use of the family systems approach in general.

It was hoped that a compilation of these data would provide a general idea of the applicability and usefulness of a family systems framework in school counselling, as well as to provide practical guidelines for other school counsellors with some previous training in family systems theory.

It was also hoped that this study would do the following: a) add to the relatively small base of research concerning the use of a family systems model by school counsellors and b) provide research data which may have implications for school counsellor practices and training programs.

Organization of the Thesis

The thesis is organized into five chapters. In the first chapter is an introduction to the study which includes a discussion of the purpose of the study. In the second chapter a review of the relevant literature is provided. This includes a review of studies which indicate the interrelatedness between children's problems and family dynamics, a description of family systems theory, a review of the literature which supports the use of a family systems framework by school counsellors and psychologists, as well as the empirical research which reports the use of family systems interventions within a school setting. The methodology used in the study is described in chapter three. In chapter four, a description of the findings resulting from counsellor interviews and group meetings are reported. In the final chapter the conclusion and implications of the study are presented. The final chapter includes the limitations and delimitations of the study.

CHAPTER TWO

REVIEW OF THE LITERATURE

Traditionally, the field of counselling psychology has utilized therapeutic frameworks based on an individual orientation (Amatea & Fabrick, 1981). These frameworks are implemented based on the assumption that the client is the one who has the problem and it is his/her behavior, thinking, or emotional reactions that need to be changed.

More recently, frameworks based on interactional assumptions have been developed and acknowledged in the field of counselling. These frameworks assume that problems develop and are maintained as a result of interpersonal dynamics and to treat an individual without regard for his/her most influential systems will not effectively solve the presenting problems.

In recent years it has been suggested that school counsellors and psychologists might be more effective in dealing with student problems if they were to use an interactional framework in their work: specifically, family systems theory (Paget, 1987; Goldenberg & Goldenberg, 1981).

The purpose of this chapter will be to review the recent literature on this subject. First, the literature which demonstrates a link between children's behavior problems, particularly in school, and family dynamics is examined. In the second section of this chapter, family systems theory is suggested as a possibility for school counsellors to use in their work with students. A description of family systems theory is offered in this section. In the third section of this chapter, a review of the literature which supports the use of a family systems model by school counsellors is presented. The empirical research which describes actual use of family systems interventions within the school setting is presented in section four. A summary is provided in section five.

Behavior Problems and Family Dynamics

The family systems approach is supported by recent research which indicates evidence of the relationship between an individual's emotional or behavior problems and the interpersonal dynamics of which he/she is a part. With respect to the present study, research suggests that many childhood behavior problems are related to the dynamics in the child's most influential system - the family.

Smets and Hartup (1988) conducted a study in which 120 families referred for treatment to outpatient clinics were compared on the basis of the child's symptomatology and family dynamics. The families' cohesion and adaptability were classified into one of three categories: balanced, midrange, or extreme. Balanced systems were described as those families which were moderately adaptable and moderately cohesive. Midrange systems included families who were in the moderate range for one dimension but who were very extreme (high or low) on the other. Extreme systems were those in which families were classified as extreme on both characteristics.

The results showed that among families referred for clinical treatment, those who were classified as balanced had children with fewer problem behaviors than those classified as midrange or extreme. It was also found that self-esteem in the sample children was related to both their system and symptoms, but these relationships were mutually exclusive. The authors of this study concluded that the understanding of the child's family is essential in understanding the child, and that treatment of the child must include treatment of that child's family system.

Another study which compared family dynamics and parental characteristics with child behavior problems was conducted by Christensen, Phillips, Glasgow, and Johnson (1983). Upon comparing a group of 36 families with a "problem" child to 9 control families, it was found that parental perception of child behavior problems was associated with marital discord and negative parental behavior towards the child. This study supports the assumption that it may be desirable for counsellors to conceptualize and intervene with a child's problems in relation to his/her family system rather than working in relation to the child alone.

The studies mentioned thus far indicate the relationship of child behavior in general to family dynamics, but there are a variety of others which concentrate on the relationship of school-related behavior problems with family dynamics.

Amerikaner and Omizo (1984) conducted a study on 90 children and their families to discover the similarities and differences in family functioning of learning disabled, emotionally disturbed, and normal school children. Using the Family Adaptability and Cohesion Evaluation Scales (FACES), the 90 families were classified into extreme or mid-range categories for each of the two major dimensions of adaptability and cohesion. It was found that families of learning disabled children interact in patterns which are quite similar to those of the families of emotionally disturbed children. These patterns in turn differed from the interaction patterns of families of normal children. Thus, the researchers concluded that plans for effective interventions should include assessment of family functioning as academic problems are seen as interwoven with family interaction patterns.

Boike et al (1978) concur with this recommendation after having gathered data which linked general familial problems (among other familial characteristics) with school problems.

These studies do not argue any actual relationship between family dynamics and child behavior problems. Their goal is to show that "specific problems of individuals and family system interaction are mutually and circularly intertwined" (Amerikaner & Omizo, 1984). These studies also maintain that the child's behavior can only be understood and treated in relation to the interaction patterns of his/her family system.

In addition to the empirical research conducted, a national survey of the National Association of School Psychologists showed that school psychologists themselves believe that family variables are related to children's school problems (Carlson & Sincavage, 1987). This study also indicated that school psychologists expressed low satisfaction with administrative support and time to conduct family oriented interventions. Those with a Masters level of education also expressed low satisfaction with their knowledge of family assessment measures. Even so, many of the psychologists surveyed were using some form of family assessment and/or intervention in their practice although the methods seemed to be quite varied.

The studies described so far strongly suggest that there is a relationship between family dynamics and child behavior problems (school-related and other). They also indicate school psychologists are perceiving a connection between behavior problems and family interaction. Many feel it is most effective to deal with the child in relation to the family context.

Family Systems Theory

School counselling appears to be at a half-way point. There is evidence relating child behavior problems to family dynamics and a desire on the part of school psychologists to work with the child in relation to the family system, but there does not seem to be a generally accepted framework for them to work with as yet.

A framework which might be appropriate is the family systems approach. This approach is seen as "central to family psychology, and represents a major paradigmatic shift within mental health practice, transforming beliefs regarding individual symptomatology, the appropriate focus of assessment, and the most effective interventions to create change" (Carlson & Sincavage, 1987, p. 525). There is also belief that this approach can be adapted for use in the school setting (Plas, 1986; Wilcoxen & Comas, 1987; Young, 1979; Goldenberg & Goldenberg, 1981).

Systems theory has, historically, been applied to physical systems, as well as to biological (Bertalanffy, 1968) and social systems (Bateson, 1972). In work with families, Minuchin (1981) has characterized the family system as including a whole that is greater than the sum of its parts. Minuchin has also characterized the whole-part relationship as, "Each whole contains the part, and each part also contains the "program" that the whole imposes. Part and whole contain each other in a continuing, current and ongoing process of communication and interrelationship" (p. 18). Each individual family member forms an interactional part of the system. He or she continually affects and is affected by each other member in the family system. Some traditional models of therapy view the present mainly as a result of the past, in terms of linear chains of cause-and-effect. These models tend to view the individual as having some deficit (Fisch, Weakland, & Segal, 1982). As a result, therapists work to look into the past and provide insight into causes or help the individual to overcome personal deficits.

Family systems theory does not focus on an identified patient in isolation, but rather within the context of one of his/her most important systems - the family. The focus is much more on the here and now as opposed to the past. Fisch, Weakland, and Segal (1982) have described this change as exemplifying a general shift in epistomology from a search for linear cause and effect chains to the cybernetics viewpoint: "...the understanding and explanation of any selected bit of behavior in terms of its place in a wider, ongoing, organized system of behavior, involving feedback and reciprocal reinforcement throughout" (p. 9). This viewpoint necessarily focuses less on individual deficits since the organization and interactions of the family system are now the primary points of interest. In using this approach one observes how members of the family system influence one another as in a reverberating circuit (Goldenberg & Goldenberg, 1981). In other words, an individual's behavior is never in isolation. It is an intricate part in the web of interrelationships with members of the systems of which he/she is a part. The child with a problem in the school setting is intricately connected with his family system, and therefore these connections should become part of the therapy focus.

Characteristics of a Family System

Within the framework of family systems theory there are a variety of "lenses" through which one can view the family. Sluzki (1983) describes three of these "lenses" as follows:

1) **Focusing on the Processes of the Family** This is also referred to as the strategic point of view. The therapist views the family in terms of its sequences and patterns of interaction.

2) **Focusing on the Structure of the Family** Focusing on the structure of the famjly. Through this lense the therapist views the family in terms of its hierarchy, subsystems, and boundaries.

3) **Focusing on the Construction of Reality of the Family** Here the therapist views the family in terms of how the members organize their perceptions of reality.

In the following discussion the three systemic lenses of viewing the family are blended together to provide a complete description of the family system. Although this description is based on all three views, it is centered around the structural model because of its clarity and concreteness.

One of the foremost supporters of the structural model of family systems theory is Salvador Minuchin. Minuchin (1981) outlines the following general characteristics of a family system:

1. **Self-in-Context** Each member of the family system develops and exists according to personal and historical determinants of self. But current input of social context is a consistent factor as well. When an individual interacts with certain people, specific aspects of his personality are brought forth that are appropriate to that context. As well, the individual affects the other people who interact with him because they react according to his responses. Fixed patterns of interaction are developed as a result of this continual and mutual affecting and reacting. A child will have certain interaction patterns with each separate member of his family.

2. **Subsystems** Minuchin maintains that within the general family system exists a variety of subsystems. The individual accommodates differently to the

people in each different subsystem of which he/she is a part. Each individual is a subsystem, and each child and parent(s) form a subsystem.

Within and between subsystems, interaction patterns slowly evolve. These patterns, or emerging "rules" of interaction, are sometimes stated explicitly, but often they are not. These established patterns affect each family member and in turn are affected by each member. They dictate how individuals in the family relate to one another. They serve to maintain positive interactions which facilitate growth, but can maintain dysfunctional interactions which inhibit problem solving as well.

Each system and subsystem has a boundary which surrounds it and delineates it from other subsystems and systems. If the rules within a subsystem are too stringent, or if the boundary around it is so impermeable that it does not allow the entry of the individual's experience from dealing with members of other subsystems or extrafamilial systems, then the subsystem members are not allowed to grow. Family members in this state are referred to as "enmeshed". If the boundary around a subsystem is too permeable, the relationship between the subsystem members may not be strong enough to provide support to its members. It is also possible in this case that an individual who does not belong in a certain subsystem may enter into it, such as a child entering into the spouse subsystem. This will create dysfunction within that subsystem which will reverberate throughout the whole family. When the boundaries around a subsystem or family system are too permeable, the members are sometimes referred to as "disengaged".

3. **Families Change** "Like all living organisms, the family system has a tendency toward both maintenance and evolution" (Minuchin, 1981, p. 21). The family system is constantly under pressure to change, be it from within the system or from outside it. The pressures may be a result of normal family

development, such as a child becoming an adolescent or leaving the home, or from spontaneous events such as a death in the family, or a parent laid off from work. These events cause fluctuations in the established patterns of interaction between system members. Normally, these fluctuations will be followed by a return to the steady state of the system. But if a fluctuation is large or persistent enough, the family enters a state of crisis from which it jumps to a higher level of interaction to cope with change. The family system continuously evolves to higher levels of functioning. It is believed that the family system has an amazing capacity to adapt and change while maintaining continuity.

Sometimes when a problem occurs, the family cannot seem to move to a higher level of functioning to solve the problem because the established patterns of interaction are maintaining the problem behavior. In fact, the family may be actively trying to solve the problem, but its method of problem resolution is actually contributing to the problem. Fisch, Weakland, and Segal (1982) suggest that problems begin as ordinary difficulties in life, most of which are handled adequately by families. But sometimes, if a difficulty is mishandled or it is not resolved because more of the same ineffective solution is applied, it escalates into a major problem. They believe that, "...people persist in actions that maintain problems inadvertently, and often with the best of intentions. Indeed, people may get caught in such repetitive behavior even when they are aware that what they are doing is not working..." (Fisch, Weakland, & Segal, p. 16). The common difficulty is escalated by the negative cycle of ineffective problem solving.

Role of the Counsellor

The role of the counsellor in family systems theory is seen as not only to understand the family system and the place of the problem within it, but also to take action to create change (Fisch, Weakland, & Segal, 1982). The persistent patterns of interaction in the family serve to maintain behavior, be it normal or problematic. If the problem-maintaining patterns or behaviors are eliminated or appropriately changed, the problem will be resolved (Watzlawick, 1974). But the counsellor cannot create new patterns of interaction for the family. His/her job is to create a perturbation in the dysfunctional interactions, to interrupt the negative cycle, and to allow the family to find more effective interaction patterns with which to deal with this change. Minuchin states, "Normal family development includes fluctuation, periods of crisis, and resolution at a higher level of complexity. Therapy is the process of taking a family who are stuck along the developmental spiral and creating a crisis that will push the family in the direction of their own evolution" (Minuchin, 1981, p. 27). Fisch, Weakland, and Segal (1982) add that if the counsellor creates a small change in the vicious-circle interaction, appropriately and strategically directed, a beneficent circle may be initiated in which less of the ineffective "solution" leads to less of the problem, leading to less of the "solution", etc. They also suggest that the counsellor might even consider it more appropriate to aim at changing the negative evaluation of the problem behavior. This change in perceptions will serve to alter familial interactions and help them move to a higher, more growth-oriented level of functioning.

Use of a Family Systems Approach by School Counsellors

To observe patterns of interaction it may be optimal to have access to the entire family system, but to change the dysfunctional patterns is possible while working with only one family member. This is possible because a change experienced by one family member will affect all family members (Young, 1979).

Weakland (1982) contends that interaction between system members is the primary determinant of ongoing behavior. If there is sufficient knowledge of interaction in systems, it should be feasible to influence the behavior of any member of a given system by influencing the behavior of another member appropriately.

This implies that if the school counsellor can work with the child to change some aspect of his/her behavior appropriately, then a reciprocal change in the familial problem-maintaining patterns will arise. This is good news for counsellors who may not have access to an entire family. A counsellor may be forced to work with the individual child if other family members are not available or willing to come in, but a family contextual focus can still be maintained.

As the situation described above may occur more often than a situation in which the entire family comes in on a regular basis, this study will focus on these types of cases. It is intended that the counsellor participants will use a family systems framework in their work with students, possibly seeing the family or parents on a one-time basis.

Recent literature has encouraged the use of a family systems approach by school counsellors. Wilcoxen and Comas (1987) reviewed current trends in family counselling and suggested that family counselling could be an option for a trained school counsellor. They conclude that an implication of these trends for school counsellors is that they should become more familiar with the principles of family systems theory and family counselling intervention strategies. This strongly indicates a need to review current school counsellor training programs.

In a review of current theories and practices in family therapy, Goldenberg and Goldenberg (1981) support the use of a family systems perspective by school counsellors. They maintain that to intervene at the family level is the most effective way to change a child's behavior and help the family gain (or regain) coping skills. It is suggested the school counsellor see the entire family whenever possible to observe family dynamics and to assess where there are functional and dysfunctional areas. Even so, emphasis is placed on maintaining a family systems perspective rather than on working with the entire family for each session.

In her article, "Secondary School Counselors and Family Systems", Young (1979) supports aspects of family counselling as an appropriate dimension of school counselling. She feels that school counsellors should use a family systems framework when working with children. This carries specific implications for the strategies and techniques employed by counsellors. Several steps are illustrated in this article to demonstrate how school counsellors may include a family systems framework into their traditional practices.

Although Young supports the school counsellor's use of a family systems framework, she believes that the role of the intervention should not extend beyond exploration with the family and restructuring that may occur with this exploration. This stance is based on the premise that school counsellors lack the training and time for family counselling.

This point of view may have some merit in that reviews of school counsellor training programs do indicate a lack of family therapy components (Fagan, 1985), although there is evidence that many counsellor training programs are in the process of being altered to reflect the growing acceptance and interest in family counselling (Wantz, Scherman, & Hollis, 1982; Caulfield & Perosa, 1983).

With regards to lack of time for family counselling, literature suggests that systems theory provides an appropriate basis for short-term family counselling (Fine & Holt, 1983; Green & Fine, 1980). Therapy does not need to be lengthy to be effective.

Also, as mentioned previously, the family systems framework is flexible enough to be used with only one member of the family on a continuing basis, while seeing the entire family or parents only once. This would take up no more of the counsellor's time than traditional counselling techniques.

Young suggests the school counsellor may wish to encourage the family to obtain further counselling by making them aware of what is available in the community. This is advisable in serious cases, but often families will not follow through with referrals to outside agencies. Conti (1971, 1973) found that there was poor follow-through with those cases referred to outside agencies by school psychologists. He contends that families may feel more comfortable engaging in family therapy or exchange of information within the familiar school setting. He concludes that "perhaps we should stop wasting our time on such recommendations and initiate treatment for them in the school" (1971, p.340).

Paget (1987) also supports the use of a family systems framework in her article on systemic family assessment strategies for school psychologists. She maintains that even though she understands that employment constraints, lack of training, and lack of supervision make it difficult to use a family systems approach in some cases, she believes that the field of school psychology must maintain a grip on systems thinking because it has potential for creating conceptual change in the educational setting.

In the article Paget explains that events occurring within the family system influence the child's school performance and adjustment in complex ways. She maintains that gaining information about the interactions of the family system can help in resolving the child's school behavior problems or skill deficits observed by teachers. It is suggested in this article that systemic family assessment by school psychologists is important to rule out or confirm the family as a primary context within which the problem is maintained. The psychologist may find evidence which supports individualized, direct remediation with the child, consultation with teachers, systemic intervention with the child, or all three. Paget defines the specific objectives of systemic family assessment as 1) the identification of an appropriate type and level of family treatment, including referral to another agency, 2) the modification of school-based treatment to focus more on mobilization of resources available to the family, and 3) the determination of short and long-term expectations for the child's progress.

In her article, Paget provides a rationale for the use of systemic family assessment by school psychologists and a brief description of systems theory in general. A description of the purposes of systemic family assessment is given, including a discussion of the modern-day complexity of families, and finally an overview of assessment strategies available to the school psychologists is given.

To assess the dynamics of the family system, Paget gives instructions for several strategies. The first strategy is systemic interviewing. In this strategy, specific lines of questioning produce information regarding a) the family's primary concern; b) sequences of interactions, usually related to the problem;

and c) differences in relationships over time. The second strategy offered is direct observations. Direct observations are used to assess the family interaction patterns. To carry out these observations, the psychologist may direct the family in a structured task, such as game playing, decision-making, conflict resolution, or stimulus interpretation. A second way to carry out direct observations is for the psychologist to observe the family undergoing less structured tasks such as talking about a subject of interest or roleplaying a family situation such as dinner time at home. The psychologist may even go into the home to conduct naturalistic home observations. The last family system assessment strategy discussed is that of self-report measures.

In summary, although Paget does not focus on family system intervention as such by school psychologists, she makes a case for the interrelatedness of a child's school problems and the family system. She also advocates the use of a family systems perspective by school psychologists.

In an article by Getz and Gunn (1988), it is also suggested that school counsellors need to be aware of family systems dynamics. The authors suggest that parents whose families are undergoing transitions and struggles will often seek the support of a professional. They maintain that this professional is often the school counsellor. The school counsellor is described as someone who has the ability to identify needs and resources, and to provide support, services, or referral.

This article focuses on the school counsellor providing services to parents through parent education programs. A rationale and a description for applying family systems knowledge and assessment to parent education programs is presented.

Getz and Gunn (1988) suggest that the counsellor should first assess the family system dynamics through an interview with family members before the program actually begins, or through conversations with school personnel who have had experience with the families involved in the program. They suggest that once the dynamics have been assessed, the program should be run on an individual needs basis, matching the skills taught to each set of parents to their familial needs.

The authors present three types of family system issues or characteristics to be assessed as well as possible parent education approaches to be used with each situation:

1) **Family Communication Patterns** Taken from the work of Virginia Satir (1971), the authors describe three dysfunctional communication patterns in which a family member adopts a role when he/she feels threatened by the behavior of other family members. The first maladaptive role is that of the placater who agrees no matter what he/she feels or wants. This person helps a family to avoid conflict, but negative feelings may be acted out in some other less direct way. The second role is that of the blamer who attacks others. He/she may block family negotiation of difficulties. The third role, the computer, is reasonable and logical, but avoids demonstrating feelings. This serves to inhibit the closeness of the family even though it might reduce immediate tension. The authors suggest that when a counsellor discovers one of the above dysfunctional communication patterns, that it is important to help the parents develop positive communication skills and structure time to talk with their children and each other. The placater should be taught to be assertive rather than nonassertive. The blamers should be taught to be more assertive and less aggressive. Parents who avoid emotions could be taught to use "I feel" messages and to listen for feelings.

2) **Emotional Distance Between Family Members** Families who are too close, in which parents may be overinvolved and overly responsible for their

children are classified as "enmeshed". Individuals within an enmeshed system do not have enough latitude for independent thought or privacy. At the other extreme, families who have rigid boundaries between members lack adequate support for their members and are classified as "disengaged". With families who demonstrate characteristics of enmeshment, it is suggested that the counsellor teach logical consequences to be used with children, confrontation skills, and "I" messages. With families who may be disengaged, the counsellor should help the family to increase closeness within the family through learning communication skills and organizing family meetings.

3) **Family Role Structuring** The third family system characteristic which should be assessed is that of family role structuring. The authors describe family subsystems and the role of boundaries in this section of the article. They describe two situations in which the family may need role structuring. The first is in the case of an "inverted hierarchy" in which the generational boundaries between parents and children are weak. Parents abdicate their parental position in order to be popular with their children or because they are not sure how to take leadership, and the children may be making inappropriate decisions. The second situation is that in which there exists a split parental team. Here the parents are split in their child rearing approaches which inhibits the children from functioning appropriately in their roles. In families with an inverted hierarchy, it is suggested that the school counsellor teach the parents to use consistent logical consequences with their children, to establish behavioral contracts, and to set goals for their own child-rearing behavior. When there is a split parental team, the authors suggest it be emphasized to parents that they negotiate their differences in private in order to function as a team in front of their children.

Although this article does not deal specifically with the use of a systems framework in dealing with students, it does advocate the necessity for awareness of family systems theory, assessment techniques, and some intervention with parents by school counsellors. In dealing with the parents, there will be an effect on the students. Thus in this indirect way, school counsellors are able to make an impact on their students with the use of a family systems framework.

It is increasingly clear in recent research and literature in general that school counsellors must become more knowledgeable in the theory and techniques of family counselling frameworks. It is also evident that more research needs to be done in order to validate the family systems approach as an appropriate and effective framework for use by school counsellors. There is a great deal of literature which supports the use of this approach in the school system(Goldenberg & Goldenberg, 1981; Perosa & Perosa, 1981), but as yet there is little empirical research describing actual use of family systems interventions within the school setting.

Family Systems Interventions in the School Setting

Williams and Weeks (1984) describe the use of systemic interventions in a school setting which are often associated with family systems theory by the first author, a guidance counsellor and family therapist. The predominant form of intervention used in this project was a variety of paradoxical techniques. Williams worked mostly with students on an individual basis, while consistently using an interpersonal or systems model of symptom formation and treatment. The counsellor utilized such techniques as defiance-based paradoxical prescription, restraint and paradoxical prediction, simple symptom prescription, positive connotation, and symptom scheduling (Weeks & L'Abate, 1982).

These methods proved successful in the cases described, but the authors caution that it is especially important for the counsellor to have the trust of the student. This supports the notion of the school counsellor employing systemic interventions since the counsellor has much more opportunity to build a trusting relationship with his/her clients on a day-to-day basis than a therapist from an outside agency.

Bowman and Goldberg (1983) described case studies in which a family systems intervention had been used within the school setting. The authors maintain that "conceptualization of a child's problem integrating a family systems perspective with the individual assessment data enables the school psychologist to make an effective intervention in the singe session meeting with parents..." (p. 210).

In their report the authors described the systemic technique of reframing during a single meeting with the child's parents. In the case studies described the use of this technique allowed parents to become receptive to altering familial patterns or structure, or to recommendations for more indepth family therapy.

This brings up an important point. School counsellors much have the ability to decide whether a problem can be handled within the school setting, or whether there is need for more indepth family therapy. It is expected that the counsellor have appropriate knowledge of the family systems approach in order to conduct in-school interventions, but there is growing belief that he/she must have the same knowledge and be able to make use of the techniques in order to make a decision regarding referrals and to motivate families to willingly act on the referral (Amatea & Fabrick, 1984).

There are always families who refuse to accept a referral to an outside agency, as Stone and Peeks (1986) illustrate in their report on the use of strategic therapy in the schools. A case study is used to describe how a school counsellor, after having tried individual counselling methods and referrals, changed her conceptualization of the problem and treatment to a family systems framework and achieved success. The counsellor used a strategic technique of family systems theory known as ordeal. This article serves to add to the evidence that systemic interventions can be employed within a school setting by school counsellors.

Another report described an elementary school family counselling project established by Goodman and Kjonaas (1984). An elementary school counsellor was supervised one day a week in the counselling of families referred by teachers and administrators. The counselling process followed most closely the strategic and structural models of family systems theory. There was a relatively good rate of success with these families, thus the authors concluded "school counsellors can, with training, intervene in the child's primary natural system - the family" (p.256).

In her book, Amatea (1989) proposes an intervention model that has been used successfully within the school setting by herself and some of her students. The method, which is referred to as Brief Strategic Intervention, is based on general systems theory which views human problems as interactional in relation to their social contexts rather than in isolation within the individual. Amatea describes the approach as one which focuses on the interaction patterns around the problem behavior. The counsellor, or practitioner as Amatea terms it, focuses on influencing people to stop nonproductive interaction patterns and to start more productive ones in as brief a time as possible. In her book Amatea explains how she and others have applied this method to student behavior problems within the school setting. She describes her book as an adaptation of the best ideas and methods of family systems theory to the context of the school setting.

There are three main assumptions in the brief strategic intervention model (Amatea, 1989). The first is that the behaviors applied to solve a persistent problem often maintain the problem. The second is that these solution behaviors are maintained because the persons performing them truly believe that they are the most appropriate ones. The third assumption is that the inappropriate solution behaviors can be interrupted most quickly by reframing the problem and prescribing actions opposite to those originally applied. According to systems theory, an interruption in the pattern of interactions on the part of one person will affect the behavior of others within that system. Thus, changing the behavior patterns of the problem-solver will produce a behavioral change in the problem-bearer.

Amatea suggests that the school counsellor must be the person who takes charge of change when behavior problems occur within the school setting. In her book, she outlines a four step procedure for use of brief strategic interventions within the school setting. First, the practitioner must gather information about the interaction around a student's problem to ascertain whether a brief strategic approach is warranted. Second, he/she must identify the dysfunctional problem/solution cycle. Third, the practitioner must formulate a solution shift involving specific action directives and a rational to motivate those involved to follow those directives, and fourth, he/she must monitor and evaluate the change effort.

As evident from the first step in the intervention process, the brief strategic intervention approach is not always necessary in resolving behavior problems within the school setting. Amatea suggests it should only be used in cases in which certain criteria are met. First, more simple, straightforward methods of changing student behavior have already been tried. She divides this more simple category of interventions into two types. The first is that of common sense methods of changing behavior such as skill-training, providing reinforcements, and use of reward systems. The second method is that which focuses on changing attitudes which are felt to support the problematic behavior by use of clarification, persuasion, or providing emotional support. If the student's problem is resistant to these direct interventions, brief strategic interventions may be appropriate.

A second criteria for use of a brief strategic intervention is that the behavior which has not been able to be changed is not embedded in either of these two situations: 1) The person is in emotional turmoil as a result of trauma such as death of a friend or family member, divorce, or parental loss of job; or 2) The person's life context is so disorganized that it is impossible for him to act in a predictable manner. This disorganization may be a result of the members of the parental team abdicating their parenting functions as a result of alcoholism, chronic physical or mental illness, or chronic social and economic deprivation. In cases which appear to be embedded in these types of situations, Amatea suggests alternative methods of therapy. On the other hand, if the problem behavior is resistant to more direct methods as a result of specific beliefs about the problem behavior being so entrenched as to make it impossible for the problem-bearer or problem-solver to try anything different, then the brief strategic intervention approach is appropriate. This is especially true when it is evident that the student's problem behavior is being responded to by others in a persistent and repetitive way at school and/or at home.

In her book, Amatea contrasts the brief strategic intervention method of therapy with behavioral therapy and strategic family therapy. She describes behavioral therapy as focusing on the pattern of learning deficits within the child while strategic family therapy focuses on the structure of family relationships. In contrast, the focus of brief strategic intervention is the process of interaction around the problem behavior. Although the author contrasts these three methods of therapy, she does admit to certain similarities between the brief strategic intervention method and that of strategic family therapy. Both methods concentrate on the here and now, both look at the interactional nature of the family system, and both use relatively similar methods of change. One major difference between these two methods of therapy is that while strategic family therapy deals with the family system, Amatea puts forward brief strategic intervention as a method of therapy which can intervene in any system in which the dysfunctional problem/solution patterns of interaction are embedded. Thus, brief strategic intervention is not a method which deals exclusively with the family system, but it does illustrate how family systems interventions can be and have been applied by school psychologists and counsellors with students in the school setting.

Summary

Literature and research show that acceptance of dealing with family-based problems within the school system is rising (Amatea & Fabrick, 1981; Perosa & Perosa, 1981). This is a result of our knowledge of the relationship between child behavior problems and family dynamics. It is now apparent that some sort of framework is needed to aid school counsellors and psychologists in dealing with these problems. There is growing acknowledgement that the family systems approach is appropriate for use within the school setting. Unfortunately, research which involves family systems interventions employed by school counsellors is limited. This may be due to the small number of school counsellors and psychologists trained in family systems theory or any other type of family counselling methods.

It is hoped that this study will add to the much needed research on the application of the family systems approach by school counsellors to their work with students. Systems theory has served to change the focus of many arenas in the mental health practice (Carlson & Sincavage, 1987). If more research is conducted on this level, it can be ascertained as to whether family systems theory would be an appropriate and useful framework to be adopted by school counsellors as well.

CHAPTER THREE

METHODOLOGY

In this chapter, the research methodology used in this study is presented. The chapter consists of five sections in which the various aspects of the methodology are described. In the first section the research design of the project is discussed. The sample used in the study is described in the second section. In the third section, a description of the critical incident technique is presented. This includes a report on the collection and analysis of interview data. In the fourth section, a description of the collection and analysis of data received from the counsellor group meetings is presented. A summary is provided in the final section of this chapter.

Research Design

The purpose of this study was to explore the use of a family systems framework by school counsellors in their work with students, focusing on the specific forms of interventions used by school counsellors which appeared to have impact.

As this was a descriptive and exploratory project, it was necessary to use a research design suited to this purpose. The critical incident technique was deemed suitable as the principle data gathering technique for this study because it is an exploratory qualitative method of research which is capable of generating a comprehensive description of a content domain (Woolsey, 1986). In this case, the content domain is the use of a family systems framework in the school setting.

The critical incident technique involves using specific interview procedures to gather information from observers about the behavior or experiences of themselves or others in situation which contribute to a specified outcome. The interview technique is semi-structured, allowing for empathic listening and perception checking; therefore, it was felt to be the best method to obtain a full description of each counsellor's experiences. As the specific activity being studied was the use of family systems interventions which appear to have impact by school counsellors, the observers had to be people with knowledge in family systems theory and techniques as well as school counselling. It seemed that the best possible observers would be counsellors working within the school system who have some training in family systems theory. They would observe and describe their own experiences with the use of family systems interventions in the school setting. During the interviews the counsellors would be asked to describe incidents in which they had used family systems interventions with their students. A copy of the Critical Incidents Interview Guide can be found in Appendix A (See Critical Incidents Interview Guide, p. 146). Although it was assumed the counsellors would describe interventions which they perceived as having impact, they would also be questioned as to whether or not they perceived an impact as a result of their use of these interventions. This would remove any doubt as to the perceived effectiveness of the interventions.

It was hoped that the counsellors' descriptions would provide information as to the specific forms of interventions used as well as information on other factors which were important in their use of a family systems framework with their students.

Woolsey maintains that even though respondents in self-report studies such as this do not need to be trained, it can be helpful to orient the respondents before the interview (Woolsey, 1986). In keeping with this suggestion, three group meetings were held before formally beginning the study with the researcher and all five counsellor participants present. As the counsellor participants all had previous training with family systems theory, the focus of the meetings was to simply review the principles of the theory, to discuss application procedures of various family systems interventions, and to outline the guidelines of the observation and reporting of critical incidents. The intent was to orient the counsellors to the purpose and procedures of the study, to make sure that they were all operating with the same definitions of family systems theory terms and interventions, as well as to delineate the kinds of experiences that were to be observed and reported during the individual interviews.

At the end of the first group meeting, the counsellors were asked to conceptualize at least four of their current school cases within a family systems framework. These cases were then used as data for discussion purposes during the next two meetings and as data for the critical incident interviews.

Participants

The counsellor participants in this study were chosen by the researcher on the basis of three criteria: First, they had to be currently working within a school system. Second, they had to possess at least a Masters level of education which included some training in family systems theory. It is not expected that a school counsellor untrained in the theory and techniques of family systems theory would begin employing the methods explored in this study. This was why counsellor participants were recruited who were already familiar with this approach. Third, only participants who were highly motivated and were already inclined to use a family systems framework in their present practice were chosen. The reason for this last criterion was that it is important in qualitative research to have participants with experience in the content domain being studied, i.e. the use of a family systems framework with students (Osborne, 1989).

Five counsellors were found who met the established criteria and who were willing to participate in the study. Although the number of participants was not great, in a critical incident study, size of sample is determined on the basis of number of critical incidents and not number of people (Woolsey, 1986). In our study each counsellor participant was asked to conceptualize at least four of her cases within a family systems framework. The cases which she reported during her interview and at group meetings would make up the sample for this study.

The counsellor participants were all female with varying degrees of experience (See table1, p. 33). Two of the counsellors were working in an elementary school setting, two were in an elementary/junior high, and one was in an elementary/junior/senior high. Two urban, one suburban, and one rural school district were represented in this study. All of the participants possessed a Masters degree.

Table 1

Counsellor Participant Characteristics and Demographics

Characteristics & Demographics	Counsellor Participants #1	#2	#3	#4	#5
Years Experience as School Counsellor	7	4	2	1.5	1.5
Level of Education	Masters	Masters	Masters	Masters	Masters
Level of School	K-9	K-9	K-6	K-6	K-12
Type of School	Urban	Suburb.	Suburb.	Urban	Rural

A letter describing the project and the intent to use each participant was sent to the Supervisor of Student Services in each of the four school districts. Along with this letter was sent a note written by the counsellor(s) in the corresponding district stating her desire to participate in the project. Each counsellor then discussed and received approval to participate in the study from the principal of the school in which she was working.

Critical Incident Technique

The critical incident technique of data gathering is an exploratory method that renders detailed coverage of a content domain. Through specific interview guidelines, it serves to collect information on incidents that contribute to a specified outcome.

The method was originally developed by John Flanagan (1954). It began as an outgrowth of studies in the Aviation Psychology Program of the

United States Army Air Forces in World War II. The Psychology Program was established in order to develop procedures for the selection and classification of aircrews (Flanagan, 1954).

During one of the first studies, which investigated the reasons for failure in learning to fly, the researchers noted that many of the reasons given by the pilot instructors and check pilots were too general and ambiguous to clearly identify specific criteria for failure. The researchers believed that to accurately determine the factors in succeeding or failing at a certain skill such as flying, they must solicit more behavioral observations. During the second study, which investigated the reasons for failures of bombing missions, an emphasis was placed on collecting more factual information, including behavioral observations.

A series of studies in the summer of 1944 on the problem of combat leadership in the United States Army Air Forces proved to be the testing ground for what was later termed the Critical Incident Technique. Flanagan describes it as, "...the first large-scale, systematic effort to gather specific incidents of effective or ineffective behavior with respect to a designated activity" (Flanagan, 1954). Combat veterans were asked to report incidents observed by them of behavior which was especially helpful or ineffective in accomplishing the assigned mission. The reports were to be as factual and as behavioral as possible. When the data was collected the researchers had amassed several thousand reported incidents which, when analyzed, produced categories of what they termed "critical requirements" of combat leadership.

After the war, Flanagan further developed the critical incident technique in studies conducted through the American Institute for Research. The technique was often used to define requirements for a certain occupational group or criteria for effective task completion.

Flanagan notes that there are a variety of applications of the critical incident technique in research. The detailed descriptions produced by this method can be used to produce measures of typical performance (criteria), measures of proficiency (standard samples), recommendations for changes in training, procedures for selection and classification, job design and purification, operating procedures, equipment design, and criteria for motivation and leadership (Flanagan, 1954). Although these purposes are all related to occupations, the technique has also been used in the area of counselling and psychotherapy.

During subsequent years, as research in the social sciences became more oriented towards experimentation and quantitative methods, the critical incident technique was used to a much lesser degree. In spite of this, the technique did see some use in studies which investigated such concepts as the following: group processes, work motivation, evaluation of clinical practica, psychological aspects of nursing, the American quality of life, and the cognition-emotion process in achievement-related contexts (Woolsey, 1986).

Although the critical incident technique was originally developed to study selection and classification of personnel and occupational duties, there is a belief that this technique can and should be broadened for use in other areas. Mayhew (1956) suggests, "...the critical incident technique, which has been used extensively in personnel selection and prediction, appears to have important possibilities in educational measurement. Its significance lies chiefly in providing empirically derived classifications of behavior which can then be used either as a framework for subsequent measurement or as the material out of which evaluation instruments can be developed" (p.598). Corbally (1986) adds, "...the technique seems to have outstanding advantages for certain types of educational research and, if certain refinements can be made, the technique can have wide application and provide valuable findings" (p.62). Studies dating from the fifties until present are proving those comments to be true (Ingalsbe & Spears, 1979; Cochran & Spears, 1980; White & Locke, 1981; Northup, Moore-West, Skipper, & Teaf, 1983; Housego & Boldt, 1985; Woolsey, 1985).

The critical incident technique is a qualitative research method which, through gathering reports from knowledgeable observers on critical incidents, provides a basis for developing criteria which contribute to a certain outcome. Flanagan describes the technique as, "...a set of procedures for collecting direct observations of human behavior in such a way as to facilitate their potential usefulness in solving practical problems and developing broad psychological principles" (Flanagan, 1954). He defines the term "incident" as, "...any observable human activity that is sufficiently complete in itself to permit inferences and predictions to be make about the person performing the act". He continues to describe an incident which is "critical" as, "... an incident must occur in a situation where the purpose or intent of the act seems fairly clear to the observer and where its consequences are sufficiently definite to leave little doubt concerning its effects" (Flanagan, 1954). In the present study, the definition of "critical" has been adapted to refer to an incident which the observer feels has a definite purpose or intent and which she believes contributes significantly to how school counsellors use a family systems framework in their work with students.

Although it is desirable to have observers report incidents that are fairly recent for accuracy, Flanagan notes that evidence regarding the accuracy of the reports is contained within the incidents themselves. If the description is very detailed and precise, it can be assumed that the information is accurate (Flanagan, 1954).

In the critical incident technique it is important that a complete description of the content be obtained. A study by Anderson and Nilsson (Woolsey, 1986) found this technique valid in representing the content domain. In their study, after only two-thirds of the incidents had been classified, 95% of the categories appeared. Use of different methods of data collection and of different interviewers affected the number and structure of incidents only slightly. The researchers in this study concluded that the critical incident technique is both valid and reliable.

In a study conducted by Ronan and Latham (1974) the critical incident technique and its behavioral indices were evaluated with regards to three measures of reliability and four measures of validity. The content validity, construct validity, and the relevance of the critical behaviors were judged satisfactory. Concurrent validity coefficients were found to be statistically significant at the .001 level. With regards to reliability, the interjudge reliability of the categorization process and the test-retest intraobserver reliability based on responses to the critical behaviors were satisfactory. The main area of concern was with the interobserver reliability which was low. This indicates that even though observers are knowledgeable in regards to the subject domain, this method is still subjective. This may be one of the limitations which need to be reported (Flanagan, 1954; Woolsey, 1986).

The critical incident technique carries with it a number of strengths and applications in counselling. It can be highly flexible, and adaptable to study a wide range of phenomena. It can be modified to collect data on factual happenings or qualities and attributes, rather than simply "critical" incidents. The technique can be used for foundational and exploratory work in counselling, as well as for generating theory or model-building (Woolsey, 1986). These strengths make the critical incident method a strong method for conducting qualitative research.

Woolsey notes that the two main principles of the critical incident technique are that factual reports of behavior are preferable to general impressions, and that only behaviors which contribute significantly to the activity should be included. She also outlines the five steps of a critical incident study: (1) determining the aim of the activity to be studied; (2) setting plans, specification, and criteria for the information obtained; (3) collecting data; (4) analyzing the thematic content of the data; and (5) reporting the findings (Woolsey, 1986). The first four of these steps will now be discussed in relation to the present study.

Establishing the Aim of the Activity

Flanagan explains that, "A basic condition necessary for any work on the formulation of a functional description of an activity is a fundamental orientation in terms of the general aims of the activity" (Flanagan, 1954). In our study the activity being studied was school counsellors' use of family systems interventions which appeared to have impact. The aim of this activity was to discover how school counsellors apply a family systems framework to their work with students. It was hoped that the detailed descriptions of cases in which counsellors had used family systems interventions would lead to the revelation of important factors in the use of a family systems framework within the school setting. There was one sub-goal of this aim. It was hoped that the descriptions would reveal specific forms of family systems interventions used by school counsellors which appeared to have impact. Not only was it thought important to establish the applicability of the family systems approach, but its perceived effectiveness as well.

Impact was defined as any change which occurred in the student's symptoms or in the interaction patterns around the problem within the child's family system. Although one might assume that to achieve impact might mean problem resolution, this is not the aim of a systemic intervention. Systemic interventions are aimed at disrupting the patterns of dysfunctional interactions which tend to surround a problem. The intervention may be conducted using one or more members of the system. It is not necessary for all members of the system to be involved in the intervention because when one member changes the way in which he/she reacts to the problem situation, this will affect how all other members react as well. This could be termed a ripple effect. The counsellor only plans how to disrupt the interaction patterns, not how to solve the problem. Once change occurs in the dysfunctional patterns of interaction, it is hoped that one or more members of the family will spontaneously move to another level of interacting. This will in turn change the dynamics of the problem, which, it is hoped, will be in a positive direction. The counsellor's main role seems to be to alter the perceptions about the problem, or about the problem child, to facilitate change. It is then left to the family how and in which direction it wishes to adapt to the change. This ensures that the new patterns of interaction are selected by the family and not something forced upon it by an outside agent.

The activity being studied in this study was the school counsellors' use of family systems interventions which appeared to have impact. The aim of the study was to discover how school counsellors apply a family systems framework to their work with students. Flanagan suggests that in a study, the statement of aim should be clear so that everyone participating has the same overall general impression of the purpose of the study (Flanagan, 1954). The activity being studied, the aim of the study, and the definition of "impact" were all discussed in the preliminary meeting with the counsellors. The purpose was to obtain understanding of the aim, as well as to orient the counsellors toward the task. While working within their school setting, they could then keep in mind the activity and aim of the project.

Setting Plans, Specifications and Criteria

During this phase of the research design one must decide the following: a) which persons will make the observations; b) which individuals, activities or groups will be observed, and c) which of their behaviors or experiences will be observed (Woolsey, 1986).

a) The Observers. Since the criteria for observers in a critical incident study are that they be familiar with the activity and can make first-hand observations, it was decided that the counsellor participants would act as observers and report on their own experiences with the use of family systems interventions. According to Woolsey, (1986) self-reports are typically used in studies in counselling. Although the counsellors were not in need of training in family systems theory, three orientation meetings were held to help them become acquainted with the activity and aim of the project.

The counsellors were told what to make note of in their practice, and generally what they would be reporting during their interview, but they were not given the interview questions beforehand. This decision was made in order to keep the reports of incidents spontaneous. It was felt that if the incidents and their details were reported spontaneously from memory, then only the most critical incidents (the ones which were most exemplary of the use of a family systems framework) would be reported. If these reports from memory appeared full and contained precise details, it was assumed that they were accurate (Flanagan, 1954). The semi-structured interview procedure of the critical incident technique allowed the researcher to probe for more details if she felt that any were missing. It was also suggested to the counsellors that if they felt a need for aid in committing details to memory, they could keep their own private notes on the incidents which they could review from time to time before the interview.

As the critical incident technique is a descriptive and exploratory one, procedures for choosing participants differ from those of the traditional quantitative methods. The counsellor participants do not need to be representative of the counsellor population in all aspects, but it is important that the participants are representative of the experience, or content domain (Woolsey, 1986). This means that in this study it was important to find counsellor participants who had experienced the use of the family systems framework in their work with their students. Although the experiences of the five counsellor participants do represent work with all the various student age ranges, as well as the urban, suburban, and rural school districts, by no means are they completely representative of the school counsellor population as a whole. They were chosen because each had experienced training in family systems theory, and each had experienced the use of family systems interventions within the school setting.

b) The Observations. The observers in this study (the counsellor participants) were to observe and report on their own experiences with the use of family systems interventions in their work with their students. It was expected that these interventions would be used with the student alone, perhaps seeing the parents or family on a one-time basis. The incidents would normally occur in the counsellor's office within the school, but no restrictions were placed on the exact location in which they were to take place.

The counsellors were given a two-month period in which to conceptualize and work on at least four cases within a family systems framework. At the end of this period each counsellor was interviewed regarding her experiences.

c) **The Specific Behaviors or Experiences.** At the beginning of the two months, the counsellors were informed that the activity to be observed and reported was their personal use of family systems interventions with their students within the school setting which appeared to have impact. They were informed that the aim of the activity was to determine how school counsellors apply a family systems framework to their work with students.

Woolsey (1986) advocates asking a question which contains a description of the activity and the aim during the Critical Incident interview. In the present study, the primary question which was asked of the counsellor participants was, "Please describe an incident in which you used a systemic intervention with a student". As "systemic" was the term used by the counsellor participants to refer to family systems during the initial meetings, this term was also used in the interview guide to mean the same.

It should be noted that the cases to which the counsellors were to apply this framework were those which were not considered highly dysfunctional, or in which the family system was not regarded as extremely dysfunctional. It was expected that these types of cases would be appropriate for immediate referral.

If full descriptions of their use of these interventions with students were obtained, it was felt that this would provide adequate information to identify specific forms of family systems interventions used by the counsellor participants which appeared to have impact. It was assumed that the descriptions would entail interventions which appeared to have impact, but for purposes of clarity, a second question was also asked, "Did you perceive impact as a result of your use of this interventions?" Although this study focused on the counsellors' perceptions of impact rather than on measurement, the counsellors were also asked, "What led you to believe there was (or was not) impact?". This questions was included in order to keep the descriptions as factual as possible, in keeping with the procedures described by Woolsey, (1986).It was also felt that this information would serve to provide a description of how school counsellors apply a family systems framework to their work with students, which is the aim of this study.

Data Collection

At the end of the two-month period, each of the counsellors was interviewed by the researcher. The interview questions were adapted during the progression of the interviews. If the first or second counsellor interviewed found a question too vague or ambiguous, it was explained and the wording of the question was changed before the next interview. The use of empathic listening and perception checking during the interviews was helpful in making sure that the interviewer and the reporter understood each other.

The interview was conducted at either the counsellor's office or her home and took approximately one to one-and-a- half hours to complete. The researcher was the only interviewer. The researcher was equipped with a tape recorder, one tape for each counsellor, the Critical Incidents Interview Guide, and a pad of paper and pencil for recording comments she deemed important, or for recording personal notes. Permission to tape record the interview was received before beginning each interview.

In family systems theory, the client is not always seen every week. After an intervention is administered, it is often beneficial to leave the family members for two or three weeks on their own in order to allow them time and space to formulate new patterns of interaction. As some of the counsellors noted that it takes awhile to perceive impact, some of them did not have any perceptions of impact at the time of the interview simply because they had not yet completed a follow-up on certain cases. In these cases, a follow-up telephone call was made by the researcher to the participants one or two weeks later to obtain their perceptions of impact. These conversations were tape recorded and added onto the interview transcripts and were labelled as "Follow-up".

Data Analysis

This phase of the study consisted of an analysis of thematic content of the data, arrived at by inductive reasoning (Woolsey, 1986). First, all the tape recorded interviews and follow-up conversations were transcribed. Then the data contained in the transcripts was analyzed on a variety of levels.

As the aim of this study was to determine how school counsellors apply a family systems framework to their work with students, it was important to explore all aspects which presented themselves in the transcripts, which might affect how the school counsellor applies this framework to work with students.

The first level of data analysis was the investigation of the specific forms of interventions used within a family systems framework and how they were used. To do this, the researcher first identified each intervention which was used by each counsellor. From the fifteen reported cases, there were one hundred and twenty three interventions. These interventions were noted in the transcripts with a highlighter and were numbered for future reference. These interventions were then sorted into clusters that seemed to naturally group together according to purpose and context of the intervention (See Appendix B, Classification of Interventions - by category and by transcript, p. 149). The categories of clusters were then named and described according to the theoretical orientation of family systems theory (Minuchin, 1981; Watzlawick, 1974; Fisch, Weakland, & Segal, 1982; Madanes, 1981), as well as other relevant theories. It was then determined which type of interventions was used most overall, which type was used most often by each counsellor, how many interventions were used by each counsellor, and how many different kinds were employed by each (See Appendix B, p. 149).

Woolsey recommends having independent judges sort the incidents into the categories to see whether the categories can be replicated (Woolsey, 1986). Two independent judges who had knowledge of family systems theory agreed to participate. Copies of the transcripts describing three randomly selected cases were given to each judge. They each got the same cases which had no identifying criteria except the numbers 1,2 and 3. These cases contained twelve interventions to be coded which were numbered by the researcher for easy identification by the judges. The judges were also given a list and description of the fourteen categories of interventions which were inductively drawn out of the transcripts of all the case descriptions (See Appendix C, Description of Intervention Categories, p. 160). The last item given to the two judges was a sheet of paper with spaces in which to classify the interventions (See Appendix C, Intervention Classification form, p. 163).

The judges were to match the intervention number with the letter of the intervention description which they thought best described the intervention in the transcript. They were also asked to make a note of any intervention in the transcript which had not been numbered by the researcher and to classify these newly identified interventions as well.

Rater A agreed with nine out of twelve (75%) of the intervention classifications which the researcher had produced, and rater B agreed with ten out of twelve (83%) of the classifications. Woolsey (1986) notes that there is no established criterion for the level of agreement necessary, but that Andersson and Nilsson (1964, In Woolsey, 1986) suggest that it is acceptable if independent raters can correctly classify 75% to 85% of the incidents into the categories. This suggests that the raters in this study achieved an acceptable level of agreement with the researcher.

Rater A identified two possible interventions which were not initially identified by the researcher. These were classified into the existing categories by the rater, and the researcher agreed with these classifications. These two interventions were then added to the researcher's list of counsellor interventions.

This study focuses on the specific forms of family systems interventions used by school counsellors which appear to have impact. As the procedure described above did not involve the perceived impact of the interventions, this aspect had to be investigated through a separate procedure.

The transcripts were analyzed again in order to determine whether counsellors perceived an impact as a result of their use of systemic interventions. Each time a counsellor made a statement which reflected a belief that there was or was not an impact in the case she had been working on, that portion of the transcript was highlighted in a different color than had been used for the interventions, and noted on a separate sheet of paper. As it was not possible to assess the perceived impact for each intervention within a case, the total combined statements for each case were assessed and a general statement was made by the researcher as to whether the counsellor had perceived impact on the whole for each of her cases. Out of the fifteen reported cases it was found that some cases in which overall impact was perceived, contained interventions which did not have impact, according to the statements of the counsellors. These interventions were then clustered according to type of intervention.

Although this study deals only with the counsellor's perceptions of impact and is not intended to prove or disprove their perceptions by any other sources of evidence, it was noted that most of the counsellors based their perceptions on the reports of others as well as on their own experiences. As this was considered to be an important factor in how the counsellor participants applied a family systems framework to their work, these data were analyzed as well. Each transcript was re-read, and every statement which answered (or which might have answered) the question, "What leads you to believe there was (or was not) an impact in the situation?", was highlighted. The answers to this question were then clustered together, which created five categories of sources of information on which the counsellors based their perceptions of impact. The frequency rates for the use of each of these sources was also computed (See Table 4, p.111).

In reviewing the transcripts, it was found that there were also two other categories of factors which describe how counsellors apply a family systems framework to their work with students. First, the types of problem dynamics of the cases presented were analyzed. As the researcher went through the transcripts, seven themes emerged which described the interaction patterns in the cases. Again, these themes were based on the theoretical orientation of family systems theory. The transcripts were color coded with highlighters according to theme. While completing this task, the researcher discovered that most of the cases had more than one theme running through them. It was decided that the categories of problem dynamics could not be mutually exclusive and no effort was made to classify the cases according to only one of the seven themes. It was possible, however, to identify which of the themes were predominant in the case description. An attempt was made to discover if the theme of the problem dynamics was a factor in the choice of intervention to be used. To accomplish this the researcher wrote all the different themes in each case on a page which displayed the type of intervention used in each case. The cases were then compared according to emerging patterns of intervention type and problem dynamic theme.

Another factor which contributes to how school counsellors apply a family systems framework to their work with students is how counsellors involve other members of the student's family in the therapy process. The transcripts were re-read with the intention of discovering what other family members were involved in assessment and intervention and how often.

The qualitative nature of this study yielded a great deal of data, much of which could not be thoroughly analyzed in the scope of this study. It was found that aside from the themes mentioned above, there were many recurring comments which arose from casual conversation with the counsellors, not directly related to any single incident. These perspectives were considered important in the understanding of how, when, and why school counsellors used family systems intervention, and family systems theory in general, thus adding to the fullness of the description of the content domain. Therefore, although these comments were not formally labelled as categories, a summary was included in the results.

Counsellor Group Meetings

There were to be four counsellor participant group meetings over the span of two months, at the end of which each of the counsellor participants would be interviewed using the critical incident technique. The purpose of these meetings was to orient the counsellors toward the tasks of observing and reporting their experiences as well as to ensure that everyone was operating according to the same definitions of terms such as family systems theory, family systems intervention, and impact. The initial meeting was held with all participating counsellors and the researcher to discuss the activity and the aim of the study as well as to review the principles of family systems theory and to discuss application procedures of various systemic interventions. During this meeting, the counsellors each received a descriptive manual of family systems interventions prepared for this project on which to base this discussion. It was also hoped that this manual would be of use to the counsellor participants and other school counsellors after the completion of the study to help them generate useful family systems interventions for their clients.

The manual is based on work by Sawatzky and Lawrence (1989). These researchers conducted a project in which they facilitated a process whereby counsellors working with substance abusers would generate creative and practical systemic interventions with their clients. The results included a descriptive list of the types of interventions the counsellors had created. Because many of these interventions were family systems interventions, this list was used as a basis for the manual supplied to the participants in the present study. It was supplemented by examples of interventions from the current literature. Upon completion of this study, examples of interventions used successfully by the counsellor participants in this study were then added to the manual to make it a complete practical guide which can be used by other school counsellors with some previous training in family systems theory.

At the end of the initial meeting each counsellor was asked to conceptualize at least four of her current school cases within a family systems framework.

At the second meeting each counsellor was asked to describe a case in which she was using a family systems framework. This was intended to help orient the counsellors toward what they should be observing in their practice and reporting in their individual interviews at the end of the two-month period. During this meeting the counsellors had the opportunity to share experiences, to suggest possible intervention strategies to each other, and to generally learn from each other.

There were to be two more meetings of the same type in which the counsellor participants would work together in creating helpful family systems interventions, but at the termination of the third meeting, it was decided by the researcher and counsellor participants that a fourth meeting of this kind was not warranted.

During the first meeting the researcher took note of any outstanding comments or concerns regarding the project or family systems theory itself. During the next two meetings a tape recorder was used in order to keep a record of the counsellor comments and case description. Any case descriptions which arose during the counsellor meetings and which were not repeated in the interviews were transcribed and included in the total number of case descriptions. These case descriptions proved to be just as full as the descriptions resulting from the interviews as a result of questions and probes from the researcher and the other counsellor participants. From the meetings and interviews combined there was a total of fifteen incidents (cases) reported by the five counsellors.

The data from the meetings was combined with the data from the interviews. Both were analyzed together according to the methods described earlier.

Summary

In this chapter the activity of this study has been described as being the use of family systems interventions by school counsellors, and the aim as being to determine how school counsellors apply a family systems framework to their work with students. The methodology used to achieve this aim, the Critical Incident Technique was then described. The first four steps of this technique have been discussed: 1) determining the aim of the activity; 2) setting plans, specifications, and criteria for the information obtained; 3) collecting data; and 4) analyzing the thematic content of the data. The fifth and final step, reporting the findings, will be presented in the next chapter.

CHAPTER FOUR

RESULTS

This chapter presents the results obtained from the analysis of the interview and meeting data. The chapter is divided into six sections. The first five sections describe results of the study which outline specific details which contribute to how the counsellor participants applied a family systems framework to their work with students.

In the first section, the categories of specific forms of interventions used in a family systems framework which were inductively derived from the transcripts are presented. Examples are also provided of each type of intervention and frequencies in which these interventions occurred within the transcripts.

In the next section, the use of a variety of interventions together within a family systems framework is discussed. Two case transcripts are provided to illustrate.

In the third section of this chapter the perceived impact of the use of interventions within a family systems framework is discussed. The cases in which counsellors perceived impact and in which they perceived no impact are discussed. A summary of the factors on which the counsellors based their perceptions of impact is included in this section as well.

In section four the themes of the problem dynamics as observed by the counsellors are discussed and related to the intervention categories as well as to perceived impact.

A discussion is presented in section five on how the school counsellor participants involved other family members in the assessment and interventions of their students' cases.

In section six a summary is presented of counsellor perceptions of family systems interventions. Although the results in this section do not provide specific details in how the counsellor participants used a family systems framework in their work, they reflect how the counsellors feel about using family systems theory and interventions in general related to their work in the schools. The results in this section did not come from descriptions of specific incidents, but rather from casual conversation with the counsellors and from questions in establishing the aim of the interview.

Interventions

The goal of this study was to determine how school counsellors apply a family systems framework to their work with students. An important factor in the use of a family systems framework, as well as a secondary goal of this study, was to investigate the various forms of interventions used within this framework. Therefore, during the interviews and at counsellor meetings, the counsellors were each asked to describe incidents in which they had used a systemic intervention their work with students. The counsellors described cases in which they had used interventions derived from systemic thinking as well as others which are not usually associated with family systems theory. It was noted that instead of completely changing their intervention techniques from the past or from traditional counselling methods, the counsellors tended to keep some of the traditional ways of working but changed the way in which they conceptualized their cases. Some traditional interventions were now used within a systemic framework, and some new interventions developed specifically for family systems theory were also added to the counsellors' repertoire.

Through analysis of the transcripts of case descriptions resulting from counsellor interviews and meetings, five broad categories of counsellor interventions emerged. The first broad category, Family Systems Interventions, was made up of interventions which are typically associated with family systems theory. The next four categories, Enhancing Collaboration Between Systems, Recommendation of Further Counselling, Teaching, and Behavior Modification all consisted of interventions which may have been previously used in traditional counselling methodology, but which were used in this study within an overall family systems framework. These categories will now be discussed in detail.

Family Systems Interventions

Interventions which were classified as family systems interventions were those which were specifically developed for use in family systems counselling. Eight types of family systems interventions emerged from the transcripts: joining, reframing the symptomatic behavior, realigning the organizational structure of the family, clarifying the dysfunctional dynamics of the family, logical extension statements, taking a one-down position, suggesting continued symptomatic behavior, and assessing changes that are safe. Each of these forms of interventions will now be described in detail and examples from the transcripts will be provided for each. Seventy-four percent of all counsellor interventions were classified as family systems interventions.

Joining

Interventions within this category are efforts on the part of the counsellor to join with one or more members of the family through expression of empathy or through building rapport. This may include sympathizing with or affirming the other person.

Examples:

1) The following joining interventions were used in a case involving a teenage girl who demonstrated symptoms of depression in school, but displayed aggression and hostility towards her parents in the home. She felt they were overprotective and she desired more independence in decision-making. There was also a great deal of frustration and anger on the part of the parents towards the daughter. Therefore, the counsellor felt it necessary to join with each member of the family to help them to be more receptive to change.

> "I did a lot of bonding with her and empathizing because she really thought at times she was crazy cause she did all this jumping...I agreed with him cause I had to win him over. I could empathize with the mom because in fact she was being treated rudely and she's working so hard and she feels that she's being put down for all her work...So I tried to bond with each one by saying, "Yes, you feel this..."."

2) This case involved a teenage boy who had been referred by his teacher because he was displaying aggressive behavior in school. There were also indicators of suicidal thoughts. The boy expressed concern for his parents' marriage because of their fighting. He described his mother as having the major role in parenting, and expressed concern because she was reluctant to discuss family problems with outsiders. When the boy and his parents came to the counsellor's office she joined with the mother.

> "Now the mother, I had been forewarned, so I really worked on that woman for awhile...Yeah, establishing a relationship and aligning with

the mother...And again, approach her with, "You sound overworked and overtired"."

Reframing the Symptomatic Behavior

Sometimes the way in which a problem is viewed by system members contributes to the problem. In reframing the symptomatic behavior, the counsellor offers a different view of the problem behavior, whether it be that of the identified patient, or another family member. This alternative view may change the perceptions of the system members about the problem or identified patient which in turn may produce a change in how they behave regarding the problem. When one person changes his/her behavior, a spontaneous change in reactions of others should occur. In the cases described by the counsellors, the technique was often used on its own, but it was also used as a technique to prepare a person or system for another intervention. It was hoped that after altering the client's perceptions, they would be more cooperative in certain interventions which would help to change the dynamics surrounding the problem.

Examples:

1) In the following case a mother was very frustrated because she could not get her little boy to eat supper or do homework. The family dynamics surrounding the problem included a lot of anger. The counsellor wanted to change the mother's perceptions regarding the boy's refusal to eat or do homework in order to help the mother change her reaction to the boy.

> "Then I tried to suggest to her that because the boy seemed to be using this as a way to try to get some personal power that it would be really important to give him some space to use his power."

2) A teenage girl who was displaying a lot of anger and aggression towards her parents because she had not been given much power in decision-making, saw her parents as overprotective. The parents also had a great deal of anger towards the daughter. The counsellor wished to reframe the daughter's overt aggression towards her parents as a desire to achieve some personal power. The purpose was to change how the parents perceived their daughter and her problem, thus making the situation more amenable to change.

"So what she's doing now is striking out for power in a pretty strong way."

3) A mother referred her grade nine daughter to the counsellor because the girl was beginning to forget things. After talking to the daughter the counsellor learned that there was an incredible amount of pressure on the daughter from the mother to succeed academically. The girl was an honors student, but was becoming very upset if her marks fell below ninety percent. The mother did not work outside the home and she spent a great deal of time trying to mold her daughter, whom she regarded as someone with no backbone who couldn't stand up for her values. When the counsellor held a session with mother and daughter, she felt she needed to reframe the mother's overinvolvement with her daughter as having nothing better to do. This might create a change of perception in both mother and daughter in order to make change possible.

> "My job at that session was to reframe Mother's overcommitment, enmeshment with her daughter. To reframe that as not having anything to do, she had nothing to do for herself, moving every four years, so she was going to make superkids...I reframed it gently, not exactly that way. I said, "You had nothing to do, so what better job than to work on your kids?"."

4) In a case which involved a teenage daughter who had begun drinking and fighting with her mother, the counsellor realized that the father had withdrawn from the parental subsystem and the mother was in charge of the majority of parenting responsibilities. In order for the counsellor to utilize an intervention which would realign the organizational structure of the family to get the mother and father to share parenting responsibilities, she first used a reframing intervention to get the family to change their perceptions of the mother.

> "And I said to her, "You're exhausted. You even look exhausted. You know you've been trying to hold this whole family together. You need a holiday"...You see I reframed it for her, rather than she's in control, that she's really exhausted and she needs a holiday because it's hard work to keep this family going."

5) In the following case, the counsellor was working with a girl in grade one who was having temper tantrums when her mother came to the school. The mother has been a single parent since the girl was born, and it was evident to the counsellor that the mother really wanted to be a good mother. It was to the point that she was defiant and denied that there was any problem with her daughter. The counsellor decided that to get any work done in regards to the dynamics around the problem it might help to reframe the mother's defiance as strength. This would help to change the mother's perceptions of the situation and perhaps of the counsellor as well.

> "But I reframed it for her, because I said to her, "You've done such a magnificent job educating yourself, looking after the child, and so you really had to be strong and not let your feelings show."

6) A teenage boy was referred because of his aggression in school, but as the counsellor talked with him she discovered that he was really worried about his

parents' marriage. They were fighting all the time, mostly about parenting. The mother felt that she was doing all the parenting with no support from her husband or son. The counsellor decided that because the son and father seemed to have a close relationship and the mother may have felt left out, that she needed to reframe the mother in a more positive light. This might change the way in which the father and son reacted to her as well as how she views herself. In this case, the reframing also served as a rapport-builder between counsellor and mother.

"I reframed the mom as being delightfully enthusiastic and spontaneous, rather than being a wicked mother...because she had lost a lot of ground with dad as a parent."

7) In this same situation, the boy had expressed concern that his mother would be unhappy that he had brought their problems out into the open. The counsellor felt she needed to positively reframe the actions of the boy so that the parents would react to him in a different manner than they otherwise might have. Their new reactions to him may serve to change the dynamics around the problem enough to alleviate his symptoms.

> "And again I reframed that, "That was wonderful because you knew your family needed some help". And he brought the family in."

8) This counsellor had been working with a little boy who was not doing any work in school. His reason for not doing any work was that the other kids bugged him. The counsellor perceived that if the kids did not bug him he would have no reason for not doing his school work, so she decided to reframe the problem of kids bugging him so that the boy would perceive the problem in a different light. This technique was used here in order to prepare the boy for a further intervention of prescribing the symptom.

> "I said, "Well, you seem to be really good at that. Kids bug you, you get upset and you don't do any work". He knew the sequence...So the next time that he came to me complaining that everybody was bugging him, I sort of reframed it into being a positive thing, that the kids were bugging him."

9) In this case a girl in grade six who had begun skipping school was constantly fighting with her mother. The mother worked two jobs and the girl felt very lonely. The counsellor reframed the fighting as something good because at least that was time that they were spending together. This technique served to show the mother and daughter that they needed to spend time together. The family would then be able to decide if they wanted to continue spending time together in that way, or in a more positive form. The technique was also used to pave the way to another intervention, that of realigning the organizational structure of the family. In that intervention the counsellor gave a suggestion of how the two could spend more positive time together.

> "I was reframing it and suggesting...that the fighting is good, and it keeps Mom in."

10) In this case the teacher and mother were very frustrated with a little boy in kindergarten because of his increasing defiance. The counsellor discovered that the boy's family had been going through a great number of changes such as a new baby, Mom staying home from work, and Dad working out of town. Before doing any other interventions, the counsellor felt it was necessary to place the boy in a more positive light. This would make the teacher and mother more receptive to any further interventions.

> "Well first of all I reframed the problem. So rather than being this naughty little boy who was acting out I reframed it as he was having difficulty coping with family change."

This intervention also reflects the understanding of the developmental family dynamics on the part of the counsellor. Not only do families need help with spontaneous problems, but also in completing the transition from one stage of life to another.

11) Here a little girl was referred to the counsellor because she was acting out a lot in school, having problems getting along with other kids, and had really low self-esteem. The counsellor discovered that the father worked out of town a lot, the mother owned and operated a daycare, and the girl had a lot of responsibility for her younger brother and sister. The mother also had some hostility towards the school, and did not have time to come and talk with the counsellor. When the counsellor talked to the mother by phone, she wanted to help initiate change by altering the mother's perceptions of her daughter.

> "Well I talked again about how her daughter seemed to feel that she was responsible for the kids and she was trying to take pressure off the mother by looking after the kids. But this was stressing the little girl out. I tried to show the child in a positive light because Mom was feeling very frustrated with her as well as teacher. So I tried to show Mom that she was trying to help ease the pressure for Mom."

Realigning the Organizational Structure of the Family

This sub-category includes giving suggestions which are aimed at creating more or less emotional and/or physical space between family members or subsystems such as parental or sibling. It may also be called redefining the boundaries of the system because the counsellor may either help to more clearly delineate the boundaries around subsystems or help to make them a bit more diffuse. The suggestions may also serve to give more or less power to different family members or subsystems.

Examples:

1) In the following case the mother could not get her little boy to eat his supper or do his homework. As a result, she became more and more frustrated and began screaming at him in order to force him to comply with her wishes. The counsellor believed that since the mother's reaction of standing over the boy was not helping to alleviate the problem, it might be necessary to create more space between the mother and the son in regards to this problem and to create more closeness in positive situations. The counsellor suggested the mother let her son eat dinner and do homework on his own, but that she reward him with a special activity if he completed these activities.

> "And I also suggested that they discuss together, she and her little boy, what the reward would be, something that he would like...What I was trying to point out to her was that she really had to back off. She just had to give the behavior and back off because what she was doing, she was always there, over him, on him...What I was trying to say to her was, "It's really important for you to give him some space for him to make his own decisions. Set an expectation, and it should be done, but give him the space to do it."

2) In this case, in which a teenage daughter felt powerless and resented her parents, the counsellor wanted to get the girl more involved in the family and also to get her some power of her own. She used the following intervention.

> "She doesn't do anything around the house so I said, "...could you give her some jobs that you could pay her for so she could at least have some earning power? You think it's too hard for her to be working in the gardens so give her some earning power in the house."

3) In the same case, the counsellor wanted to help the daughter and her parents to understand each other as well as to bring the whole family closer together.

"Then I gave the homework to try and use that model and to have specific times like coffee klatches around the kitchen table...I said, "I think it would be really important for you to just set a time to come in (to the kitchen) and try and use the communication model a bit...Maybe once a week, you know whenever it's convenient like a Sunday morning or could sit around the kitchen table and you could find a time when you could all be there.""

4) The following intervention was used in a case which involved a teenage girl who was feeling overwhelmed and smothered by her mother who was not working outside the home. The intervention was aimed at the mother in order to create some space between mother and daughter.

"I prescribed that. She is going to look at possibilities of teaching night school and she may even go to a full-time job. When I was working with her in the morning, I suggested she go to groups, Parent's Place, get involved for herself. I prescribed those kinds of things and basically said,'You know try it and see'."

5) The case which follows involves a teenage girl who had begun to use alcohol and was fighting with her mother. The mother had most of the parental responsibilities in the home. Here the counsellor wanted to create more space between the mother and daughter and to change the father's position in the structure. She felt it necessary to bring the father and daughter closer together, and to give the father more equal status in the parental subsystem.

"...what I prescribed was that Mom stay out of the parenting or the decision-making. The girl, whenever Dad's home, has to go and Dad can't slough it off to Mom...She had to go to Dad if she wanted a curfew, if she

> wanted to know if she could go somewhere, etc., etc.. And that made Mom, who was a little bit shaky with Dad on whether he could handle it, she had to release the reins and give him a bit more confidence."

6) In the same case, the counsellor used this form of intervention to help strengthen the parental subsystem. The counsellor suggested that the daughter cook supper once a week and the parents go for a walk or for coffee in order to talk.

> "The second thing is that Mom and Dad need to talk because I had a feeling there that this fellow didn't even know what the mother was concerned about...I said, "Okay, that has to be at least once if not twice a week. And what you want to talk about is anything you need to talk about. You go. Your daughter is here saying she's going to cook you all supper, she's going to look after it once a week...". So I prescribed that she cook supper because to get these adolescents drawn back into the family I give them a little talk and ask them about how they can help to make their family happy again. And one of the things I prescribed was that the children make supper for the family once a week, as a beginning intervention..."

7) In the following case the counsellor discovered that a teenage boy felt he could not talk to his father, and there was fighting between the parents, as well as an unequal division of responsibilities in parenting. The counsellor believed it important to create more strength and uniformity in the parentalsubsystem while at the same time creating less space between the boy and his family.

> "So again, I recommended family meetings every Friday with everyone there. There was a little girl, I said she participate as well...There again the supper every week, he just grabbed onto it...And Mom and Dad could go out and do their thing, go down for coffee or whatever...and I sent home

the contract sheet I use for responsibilities for each person in the family. So that they each have the responsibilities again to help the family."

8) This is a case which involves a single mother and her daughter in grade six. The girl had been skipping school and through an interview with the girl and her mother, it was discovered that the girl felt she had no individual time with her mother. The mother worked two jobs and the father was no longer involved with the family. The counsellor assumed that the mother might give up some of her time for a date with a man, so she decided to use this technique to create a stronger boundary around the mother - daughter subsystem.

> "So I met with them both and when we talked about it, they decided to go on dates with each other...Yes, once a week...I just said I thought they should go on a date, it was like prescribing it...Then I mentioned that being a date as a time that they could be together with no interruptions."

9) In the following case a kindergarten boy was referred because he was acting defiant both at home and at school. The counsellor learned that there was a new baby in the family and the father had recently begun working out of town. She felt that there may be too much distance at this point in time between the boy and the parental subsystem. In order to create a change in the symptoms, the counsellor tried to strengthen the bond between the boy and his parents.

> "For example, at home his mom made sure that he had some individual time with her, when the baby was asleep or whatever, she would spend some extra individual time with him...A predictable time each day...When Dad came back he took over the role of that. Every Wednesday evening he and Dad would do something together and the I little boy got to choose what it was..."

10) A mother came to see the counsellor because her little girl was not doing her homework. The mother had become very concerned about this problem, and had consequently become so involved in the homework that she would sit with the girl and do the homework with her. The counsellor felt that in order to change the dynamics and the perceptions of the problem,
she had to create more space between mother and daughter in this area, and more closeness between the two in more healthy, positive areas.

> "So I guess the strategy there that I'm using is to kind of send the mom on vacation. You know, "Don't you bother at all about the homework. We'll take care of that at school. If the homework is not done we'll make sure that we have a strategy for that. The time that you should be spending with the girl, rather than sitting there squabbling with her over the homework, is to do something more fun together. So that you'd be spending more fun time with her."

11) This case involved a boy who was not getting his school work done. His mother, a teacher, would spend a great deal of time with him in the evening trying to help him. Since this was the only time the mother was spending with the boy, the counsellor felt that if the boy had no homework perhaps he would not get to spend time with his mother. She felt that if the mother spent less time with the son on the problematic areas of homework, and more time with him doing fun things some of the pressure in the mother/son
relationship would be released.

> "So in that case one intervention which seemed to work quite well was where I asked her to stay out for a period of time and I asked the dad to get involved."

12) In this case a girl in grade four referred herself to the counsellor. Her parents were divorced and she was upset with her mother's commonlaw

husband. After talking to the girl's mother the counsellor discovered that the mother does not agree with some of her partner's parenting techniques and puts him down in front of her daughter. The mother has seemingly joined with the girl in the sibling subsystem. The counsellor thought it necessary to have the mother return to the parental subsystem, and to strengthen the boundaries around this subsystem by the following technique.

> "I just asked if they could get together and try. You have to be consistent, you have to set the rules and one thing is when you discuss things like that it shouldn't be in front of the kids..."

13) This counsellor was seeing a boy because his marks had reportedly gone down since his parents' separation the year before. The boy lived with his mother, but spent a great deal of time with his grandparents because of her shiftwork. When visiting his father, his new girlfriend was often around and the two of them didn't seem to get along. The counsellor believed that at this time the boy may have felt too much space between himself and his parents. She felt that tightening the boundaries around him and each parent might help to create a change in the problem.

> "The only thing I did, I said that maybe him and his dad should maybe go off and maybe he needs to tell his dad that these things are happening."
> "So I asked him, I said, "Maybe you should go back home and ask your mom", since he knows the difference, but he's not too sure whether they're separated or divorced. So I asked him to go back and find out."

Clarifying the Dysfunctional Dynamics

The counsellor either verbalizes the dysfunctional patterns of family interaction or helps the family member(s) to clarify them. This may produce altered perceptions about the problem which may create alternative patterns of interaction. Methods of clarifying the dysfunctional dynamics may include talking to one or more members of the family, use of pictures, puppets, or other concrete techniques.

Examples:

1) In this situation a mother was very frustrated trying to get her little boy to eat supper and do his homework. She was becoming more and more involved and upset over the problem. The counsellor perceived her increasing involvement as adding to the problem; therefore, she used a realigning intervention in which the mother would not be so involved in getting the boy to eat or do work. She used clarifying in order to help the mother understand and accept the intervention.

"I guess what I was trying to stress for her was that she was getting so upset because she felt she had to push him."

2) In this case a teenage girl came in with her parents. She was acting aggressively towards them because she felt they had not given her enough personal power in decision-making. At the same time they were feeling upset at being treated so rudely by their daughter. The counsellor felt that for the family members to begin working with each other, they needed to understand why each of them was acting the way they were.

"So we finally got to the point of analyzing it to some degree and saying, "Your daughter is feeling..." And then I actually physically did some work with them. I took the body posture of each of them, so that they could see it. Like the daughter was doing this, and the father was feeling dismissed and when I could do it physically they could see it more clearly and could put one word to it like dismissed, put down, smothered, and the daughter having no ground to stand on...I did the mom, she was the hardest because she was feeling...I kind of cowered down because that's the way she feels. When they get in a fight she just backs off, she doesn't know what foot to stand on"

3) In this same situation the counsellor used a clarifying intervention in order to alter the parents' perception of their daughter so that they would be willing to accept the next intervention. She would then suggest a realigning intervention which involved drawing the daughter into the home and paying her for odd jobs.

> "I just said, "I see the fact that you have asked her to stop her job. I believe it is important for her to have some earning power". She doesn't do anything around the house so I said, "She feels like she has no power now..."

4) Using the same case the counsellor describes how she used the history of each person to clarify the dysfunctional family dynamics.

> "I was able to point out to the daughter that her mother felt that her mother never cared for her...I tried to point out to her that given her mom's history that she was doing this because she knew what it was like to be unmothered. The last thing she wanted was for her daughter to feel that..."

> "So then I was able to say to the girl, "You see why somehow it upsets your dad so much when you don't do things with the family, and when you strike out on your own. Because this is exactly the value that he wants because he didn't have it as a child."

> "But what I said to them was, "Because this girl at a young age and at other times, crucial times, almost critical decision times, like what high school to go to and that kind of thing, you made that decision for her virtually"...And I said, "These are all things where she was trying to make a decision and gain some personal power, not in a rebellious way. And you took away every one of them."

5) In this case the counsellor clarified the dysfunctional dynamics when a teenage daughter and her mother began getting into a conflict. The daughter told the mother how and why she hated her younger brother, and the mother dismissed what she had said as being unrealistic.

> "So then I talked about perception and how you may both be right. Because of the girl's different perception, she sees him, for some reason the needs were not met for her so she feels that he's got all the needs met with the parents."

6) This girl was also getting into alcohol and had an older boyfriend. The counsellor learned that the girl had always wanted to be closer to her father, who had not been involved in parenting to a great extent. She believed that perhaps what was happening was that the daughter was replacing her relationship with her father with one which involved an older boy.

> "And I said, "You tighten up the relationship with Dad and daughter and the boyfriend will probably disappear."

7) In the case which involved a teenage boy who was acting aggressively in school and who was concerned about his parents fighting, the counsellor discussed the dynamics with the whole family present. The mother was doing the majority of the parenting and felt very unsupported.

> "I drew the triangulation you know, where the boy was coming in and was stepping in between them now, and the mother was upset because he was aligning with Dad because him and Dad had a closer relationship."

8) In this case a girl in grade six was skipping school. Her mother worked two jobs and there was no father in the home. The counsellor asked the girl to draw her family to help her to assess the dynamics of the family.

> "She drew a family picture that didn't include herself. So she does see herself as quite gone."

Counsellors who employed this form of intervention often asked the child to talk about the drawing.

9) In this same case, when the counsellor talked to the daughter she found that the girl has a younger sister. The mother would ask both girls to go out and the younger one would say yes while the older would say no. The mother thought that the daughter simply did not want to come, but actually the daughter wanted to have time alone with the mom.

> "So actually that's what I did with the daughter when I saw her by herself. We drew a circle of that. We drew a circle of how it happens. And going to end it."

10) In this case, when the counsellor talked to the mother she helped to clarify the dysfunctional dynamics in the family by asking the mother to describe what happens in the problem situation.

> "So then I asked her to describe what typically happens and she went through and it was just so clear. And I asked her what was happening..."

Logical Extension Statements

The counsellor accepts the client's point of view but also adds a new view based on the client's in order to help him/her to view the problem in a new light.

Examples:

1) In this case, which involved a teenage daughter who was aggressive and hostile towards her parents because they had made too many of her decisions for her, the counsellor used a logical extension statement. The girl was feeling as if she was crazy, and was becoming very depressed in school. The

counsellor wanted to help the girl to see the situation in a different light in order to facilitate an effort towards positive change.

> "She admitted it; she said, "I'm rude and I know that's awful", and I said, "Yes, you are rude and when you have no other channel to speak you have to do something to survive." So I reframed it as a survival technique."

Taking a One-Down Position

The counsellor helps the client to feel relaxed and to be more cooperative by taking a one-down position. The counsellor may use his/her manner or speech to help the client not to feel inferior. He/she may also be helping to empower the client.

Examples:

1) In this situation a little boy was very quiet in school and was being very defiant at home with mother. After the counsellor worked with the mother to allow him some natural ways of exerting some power in the home, she tried to implement some techniques in the classroom whereby he would feel more confident in expressing himself.

> "I'll ask him something where I hope he cannot be too threatened."

2) This counsellor used this intervention again in a case in which a teenage girl was exhibiting depressive behavior in school and aggressive behavior at home because she felt like she had no power in the home. The counsellor believed that the first thing she had to do was to put the girl in a one-up position to begin giving her some power and confidence.

> "That was another thing; the very first session I had with the girl I said to her, "You are doing all, you are to decide if you want your parents involved". I tried to give her power, that was my first intervention...Right

> away I said, "I don't want anybody in the family contacting me except you and you're the one to make the appointments" I asked her to check with her parents to see if they would be willing to come in; she did. When they contacted me I said, "I want your daughter to do all the arranging..."

Suggesting Continued Symptomatic Behavior

The counsellor may suggest that the client actually plan the occurrence of a symptomatic behavior. This may indirectly help the client gain control over the symptom, learning how to start and stop it. It may also produce change in family interactions around the problem since the nature of the problem is now changed. The focus will be less on the symptoms and more on the interaction. The suggestion to continue the symptomatic behavior may also create a paradoxical effect in which the client defies the counsellor by stopping the behavior altogether.

Examples:

1) In the following case a little six year old girl was having temper tantrums at school. The child's family consists of her and her mother, who comes into the school quite often. The child and mother were having power struggles, so the counsellor thought that it would be fairly easy to eliminate the symptoms at school by suggesting that the girl should continue to have her temper tantrums, but on a daily basis. Because the little girl was very defiant, she might stop them just out of defiance of the counsellor, or

she may realize that she does have control over when and where they occur.

> "It was the little girl who was having temper tantrums and we prescribed that she had to have a tantrum every day."

In the last case the girl immediately stopped the tantrums in school except for when her mother was present. Different interventions were used to create change in the family interaction patterns to deal with the continued behavior. 2) The little boy in this case was not doing his school work and was saying it was because the other kids bugged him. The counsellor believed that if she suggested that he actually get the kids to bug him even more, he would realize that he does have a certain amount of control over whether or not the kids bugged him and whether or not he did his work. It would then be his decision, not someone else's, of how he was going to react. This suggestion was quite a change for this counsellor who had been sympathizing with the boy up until that point.

> "So I decided I would prescribe the symptom for him and see what happens...So I suggested that he work at getting kids to bug him more, and at two o'clock every day he was to get somebody to bug him. I want him to know first of all that he has control over people bugging him because he seems to think that he does nothing, it just happens, and he gets upset with it. And secondly, I wanted to kind of check just by prescribing it if he would become a little rebellious about it...I've told his parents about it too because I thought it was pretty radical. I wanted his parents to be in on it and for them to know about it...So that might be kind of scary for him so therefore he might as well keep doing it, in fact do it more - get them to bug him more."

In that case the boy became defiant with the counsellor and insisted he did want to do his school work. He eventually began picking up his books and going to the library to work when he got upset, rather than running out of the classroom crying.

3). In this case a grade six girl began skipping school. The counsellor learned from the girl that she was doing this to make her mother angry. She felt that she received very little attention from her single mother, who was working two jobs. The mother and daughter seemed to be fighting quite a bit, so the counsellor thought that continuing this fighting might be a good thing since at that time, it was almost the only time the two spent together. The suggestion implies that the two need to spend time together, but they had the opportunity to choose either to follow the counsellor's suggestion or to find some other method of spending time together.

> "But I did suggest there that maybe they should keep fighting because it gives the mom an opportunity to show that she cares."

4) In this case, the counsellor suggested continuing the symptomatic behavior in order to change the dynamics within the sibling subsystem. The sister fought constantly with her younger brother, and she admitted that she hated him. The parents had suggested that the children spend 15 minutes a day together, but the counsellor believed there needed to be more space created between the children so that the bonding could happen naturally and spontaneously, instead of by force.

> "Yeah, and I had also prescribed, because the parents were prescribing that she spend 15 minutes a day with her brother, and I prescribed that they don't talk to each other."

Assessing Changes That are Safe

This intervention involves exploring with the client potential dangers of improvement. This may help the client to realize how a change in his/her behavior will affect the dynamics in the rest of the system.

Example:

1) In the case involving the boy who would not do his school work because other kids were bugging him, the counsellor wanted to prescribe the symptom (getting kids to bug him), but first she needed to reframe the bugging behavior as being positive. To do this she had to help him assess the effects of any changes they might make. As he was using the bugging behavior as the excuse for not doing his school work, she wanted him to explore what would happen if the kids did not bug him.

"I reframed the behavior first as being positive, and what would happen if he didn't have them to bug him. He didn't know what would happen if he didn't have them to bug him."

After this reframe, the counsellor could then move to the next intervention of suggesting continued symptomatic behavior.

The next four categories all describe interventions which may have been previously used by school counsellors in traditional counselling methodologies, but have been used here within a family systems framework.

Enhancing Collaboration Between Systems

The counsellor views the problem in a larger context. The interaction patterns between various systems and the family are examined and the counsellor tries to improve the dynamics between these systems in order to produce a positive impact in the problematic situation. Five percent of all the reported counsellor interventions were classified as Enhancing Collaboration Between Systems interventions.

Examples:

1) In the following case, the counsellor encountered a grade three girl with polio, who was being pushed along in school and treated as a normal student. She did not want to do the school work, so teachers would move her to the next grade because they did not know what else to do and her peers 4 regarded her as spoiled. The parents seemed to be against the school, and the teachers believed the problem lay at home. The counsellor intervened in order to start bringing this girl's systems together to raise her level of academic success.

> "So this year we decided to have conferences in which we included the teacher, the student, the parents, the teacher aide, and myself...so we had got the Glenrose hospital involved and the hospital phoned the other day for the first time for clarification of what's happening and has gotten the story from the home and the school. My first intervention, a primitive one, was when I sat in on the parent-teacher interviews."

2) In this case, the daughter had problems coping with her parents' separation which had happened about four years previous. The mother had explained that she and her commonlaw husband get along very well with her ex-husband and his new wife, and that at Christmas the whole family spends it together. The counsellor viewed the two systems as perhaps being too close which hampered the daughter in her ability to accept the separation. She felt that creating more space between the two systems would help the daughter with this problem.

> "I just asked her to think about that "Maybe the two kids should spend time with their dad and some time with you.""

Recommending Further Counselling

Some of the counsellors felt it necessary to refer the client for further counselling whether it be through themselves, through a school consultant, or through an outside agency. These referrals were given with the family system in mind. Even if only one person was referred for counselling, it was hoped that there would be an effect within the interaction patterns of the family system.

Seven percent of all counsellor interventions fell within this category.

Examples:

1) The following intervention was used in a case which involved an immigrant boy in grade one who was referred because he was very nonverbal in class. It was discovered that the boy's mother was experiencing a great deal of frustration in trying to get him to eat his supper or do his homework. She was alone with the children during the evening, at which time her husband worked out of the home. The mother was the prime disciplinarian in the home.

> "...and I suggested strongly that she and her husband both come because it really seemed clear to me that she was carrying the burden and maybe we could clarify some of this..."

2) This case involved a boy in elementary school who was acting out in class and not completing his work. His mother, who was a teacher, would help him with his homework but this was the only time she would spend with him. The father would be in charge of doing more fun activities with the boy. The counsellor believed that the boy was not doing his work in class in order to get the mother to spend time with him. There were also indications that the mother was reluctant to let the father help his son in academic endeavors because he possessed only a grade eight level of

education. The counsellor believed there were many dysfunctional dynamics at work.

> "I had told her one time that maybe it would be a good idea if maybe the three of them would go in cause I'm limited in terms of my time to do especially with her time too."

Teaching

These interventions were ones through which the counsellor imparted some information in order to help produce change. This information was imparted through talking to the child or family, recommending books, providing listening or reading materials, or through other sources of information. Nine percent of all counsellor interventions fell within the category of Teaching.

Three sub-categories of teaching were inductively created through a close analysis of the transcripts:

Teaching Parenting Skills

This category includes such things as helping parents to learn how to set rules, and how to bring consistency to parenting.

Example:

1) In this case, the mother was having difficulties because her little boy was displaying disruptive and defiant behavior at school and at home. Her husband had recently been working out of town a great deal, and she was not used to being the family disciplinarian as he had always fulfilled this role.

> "So we used Dreikur's kind of model of natural and logical consequences and I worked a little bit on parenting with her...So we used the natural consequence one morning of letting him miss the bus and then he had to spend the morning in his room...So we worked some on helping Mom be more comfortable with her role as a family disciplinarian."

Teaching Communication Skills

In order to help the client and his/her family deal more effectively with feelings, the counsellor teaches one or all family members an affective communication model.

Examples:

1) This case involved a teenage girl who was aggressive and hostile towards her parents. Her father reacted to her in a similar manner while her mother often retreated and kept her anger and frustration to herself.

> "I taught a communication model to them...So what I tried to show them was the communication model of taking the behavior that is bothering you and describing it in detail neutrally, and then saying how it affected them...Then I gave them the communication model and I tried to give them some homework as an intervention that if they could, each of them take the issue that most bothered them, the behavior, and to say it to one another in this structure, not to say it blamingly..."

2) The following intervention was used in a case in which a boy in grade four came to the counsellor and explained a secret which he had been holding for quite some time. The boy's sister in grade nine had been using alcohol and she had warned him not to tell.

"I asked the parents to talk with him and make sure to make him feel good that he had told me about what had happened and to affirm that yes, that was the right thing to do."

Normalizing the Problem

The counsellor helps reduce the client's anxiety around a problem by helping to explain it or by providing information about the problem. Reducing anxiety may serve to change the dynamics around the problem.

Example:

1) In the following case a teenage girl who felt that she had no personal power because her parents had been making all her decisions for her was displaying a compulsive jumping behavior. The girl was very worried. Her parents saw the behavior as being very bizarre and tried to get her to see a psychiatrist.

"I did a lot of reframing, "You are not crazy, this is what I think is going on. This is quite acceptable behavior given the fact that you have no other channel"...because she had no power and she had to somehow...either that or I think she'd have gone crazy...All they really needed to do was to let her try and express herself, and since she couldn't ,she withdrew and started doing this rather, almost repetitive kind of physical behavior because she had no arms or legs...And I've been downplaying it, I've been saying it's normal given the situation."

Behavior Modification

Interventions which were classified as behavior modification interventions were those which were used to elicit a certain behavior from the child. In the use of these interventions, the counsellor assumes that it is within the child's power to change and encourages the child to do so. Behavior Modification programs are those in which the child receives reinforcements, such as points, stars, rewards, etc. for certain behavior.

Seventeen percent of all counsellor interventions fell within this category.

Example:

1) In this case a boy in kindergarten was referred by his teacher and his mother because of disruptive and defiant behavior in class and at home. The counsellor discovered that there had recently been quite a few changes in the

boy's home life. He seemed to feel isolated from the other members of his family system. The following intervention was set up with the boy, his mother, and his teacher in order to tighten the boundary between the boy and the parental subsystem.

"We also had some kind of behavior mod thing in the classroom whereby if he behaved well that morning he got a happygram that went home and if he collected five happygrams throughout he would go off to Bullwinkles or whatever he really liked."

In total, the five counsellor participants reported their experience with the use of a family systems framework in fifteen case studies. In these fifteen cases, a total of one hundred and twenty-three interventions were administered by the counsellors. There were fourteen forms of interventions which were classified into five broad categories. After identifying the fourteen forms of interventions used by the counsellor participants, the number of times each counsellor made use of each form of intervention was calculated (Table 2, p. 83).

Although there were fourteen forms of interventions which were used by the counsellors, there appeared to be four forms which were used more often than the other ten. These four forms of interventions were the following: joining, reframing the symptomatic behavior, realigning the organizational structure of the family, and clarifying the dysfunctional dynamics of the family. It is interesting to note that the first three of these interventions can all be used in altering perceptions about the problem.

It is also noted in Table 1 that counsellors #1 and #2 preferred to use many interventions within their cases while the others used fewer. It must be taken into account that counsellor #2 reported five cases while the other counsellors reported two or three.

Table 2

Number of Times Intervention Used by Counsellors

Interventions	**Counsellor**						
	#1	**#2**	**#3**	**#4**	**#5**	**Total**	**%age To Interventi**
Family Systems							
Joining	4	9	0	2	2	17	14
Reframing	3	8	3	3	0	17	14
Realigning	6	9	1	3	4	23	19
Clarifying	9	6	2	0	6	23	19
Logical Extension	2	0	0	0	0	2	2
One-down Symptom	2	0	0	0	0	2	2
Continue Symptom	0	2	2	0	0	4	3
Assessing Changes	0	0	1	0	0	1	1
Total Family System						89	74
Enhancing Collaboration	0	5	0	0	1	6	5
Recommend Counselling	2	5	0	2	1	10	8
Teaching							
Parenting Skills	1	2	0	2	0	5	4
Communication	1	1	0	0	0	2	2
Normalizing	2	3	0	0	0	5	4
Total Teaching						12	10
Behavior Modification	4	0	0	1	1	6	5
Total	36	50	9	15	15	123	

* Decimals of each intervention have been rounded up, therefore the amount of all the family systems interventions added up is 2 points higher than the number reflected in the total systems row.

Use of Interventions Together

As stated earlier, even though counsellors made use of interventions which were developed specifically for family systems theory as well as others which are not traditionally thought of in relation to family systems theory, all interventions described by the counsellors were used within a family systems framework. That is, the counsellors tended to view the problem within the context of the child's family system. In a few cases the problem was viewed within the context of the child's family system and one or more of the other major systems in her/his life. The intervention used with this approach was usually to enhance collaboration between systems. This intervention is focused on the family system in that it works to bring about collaboration between this system and others which directly influence the student.

The interventions described by the counsellor participants were used in the following way. It seems that they would start out by trying to assess the dysfunctional interactions within the family dynamics, or within the dynamics between the family and some other system. The counsellors then decided which patterns of interaction needed to be changed. Upon creating a change in the interactions, it was hoped the system members would spontaneously find new, healthier patterns of interaction.

In order to create change in the patterns of interaction within the family system or between systems, the counsellors sometimes found it desirable to create and make use of a variety of interventions within a single case. For example, the counsellors often found it helpful to join with the client(s), and/or to reframe the symptomatic behaviors before using any other interventions. These interventions seemed to help the client(s) be more receptive to the possibility of change, and therefore be more ready to accept other interventions, such as continuing the symptomatic behavior or realigning the organizational structure of the family. Sometimes reframing itself was enough to create change in the patterns of interaction.

Two case transcripts have been included here to illustrate how the interventions were used together within an overall family systems framework. The interventions have been underlined and labelled for easier identification.

Case #1

In the following case the counsellor assessed the situation and found that the client's symptoms were associated with possible dysfunctional interaction patterns within the home. Her goal was to explore these patterns in further detail, to create interventions which would prepare the family for change, and then help to initiate change. (This transcript is taken from a counsellor meeting, rather than an interview.)

C: I have a boy and his family which is another one that is quite similar to the last case, but yet different in that probably not as severe as the girl's situation. This boy missed getting into the challenge program this year. He's a grade nine student. His teacher alerted me and I also became quite alarmed because as I walked down the hallway and checked the kids out, I noticed he was acting out in a very sort of perverse, angry way. Then the teacher had approached me with some writing that he had done in language arts. He was writing a farewell letter to his parents who have not done a good job raising him, he had all kinds of complaints, etc., etc.. So we brought him in and he started talking and crying. Things were not going well. There was a close relationship with the dad, but with the mom, the mom was doing all the parenting. Dad was coming home and going down into the computer room. And his initial complaint was Mom and Dad were fighting all the time. So what happened was that we got the parents in. We phoned and made contact with the parents on Friday and he came in on Monday very, very alarmed. He said, "My mom will absolutely kill me. My dad won't mind counselling but my mom does not want to put out any secrets, east European, it stays in the house". But he was willing to go for it.

I: He wasn't scared.

C: No, he wasn't scared, he wanted the parents' marriage improved. He was very easy to talk to and very bright. We called the parents in and within 15 minutes, it was a round table discussion, which sometimes serves a purpose and sometimes does not serve a purpose. But our principal tends to use it a lot, so you have all the players there. And so the poor kid, the poor parents and six teachers, the counsellor, and I don't know, especially if you're going to do any sort of counselling work or whatever, it's very intimidating. The grade nine teacher knows where I'm coming from. After 15 minutes into that interview she invited everybody to leave so the counsellor could talk to the parents. And that was just wonderful. Now the mother, I had been forewarned, so I really worked on that woman for awhile. (Joining)

I: Establishing a relationship.

C: Yeah, establishing a relationship and aligning with the mother. And again approach her with, "You sound overworked and overtired". (Joining) She was, she has to do all these lunches and weigh all this food and she's really a very bright, hilarious type of lady just going for it. Anyway, by the time they're into the session, they're both extremely with-it parents, they could see. I drew the triangulation you know where the boy was coming in and was stepping in between them now, and the mother was upset because he was aligning with Dad because him and Dad had a closer relationship. (Clarifying) And so she says, "I have to do all the disciplining in this house, you know while they just take it easy". So what we suggested was do we want a session again at Parent's Place. (Recommend Counselling) and they said they would like a session, so we had one session with the boy there. And the next day in the hallway, he gave me a sign like, "Thank you Mrs. ____________". So already, we had noticed a big improvement in his walking and talking. They felt that they could see very much where he had become triangulated and was trying to get in there and use some of his own power and authority. So what happened was that we had the counselling session again with the three of them. I said to the boy, "Be as honest as you can". Well here we had they talked about some of the interactions that go on at home and things that are a concern. And what came out very much was the mom and dad's fighting was over the kid. And the inconsistency of expectations, i.e. Dad thinks it's not a problem for the boy to be out every night. Mom feels one or two nights a week is plenty, the rest of the time he should be with family and doing things. So within five minutes they were fighting in my office which was really nice because you get to see it and point it right out to them. I reframed the mom as being delightfuly, because she had lost a lot of ground with dad as a parent. So I reframed her as being delightfully enthusiastic and spontaneous, rather than being a wicked mother. (Reframing) And by the end of the interview she was touching me, I was A-Okay. And this was throughout,and this was positive because they knew, they knew that they were being called. And they admitted yes they knew. The dad pointed out twice during the session, "You know, we're not learning anything new here. It's just that we never did anything about it before". And the mother cried.

C2: So the spontaneous part was true.

C: That's exactly how she reacts, and she cried in the first interview too. But very nice lady and trying very hard. So again, I recommended family meetings every Friday with everyone there. There was a little girl; I said she participate as well. (Realigning structure) And they admitted, they just don't have the time and they haven't taken the time to sit down and they could see there are the little itsy bitsy things like the stereo being on when Mother comes into the house full blast, and those kinds of things. The boy was very willing. There again I suggested he take care of cooking the supper once a week; he just grabbed onto it. (Realigning Structure) And Mom and Dad could go out and do their thing, go down for coffee or whatever. (Realigning structure) He already cooks, and he does do cooking, but it was always in a...that family needed to be affirmed as a family, and I kept saying throughout the session just what wonderful people they were. (Joining) And they were, all of them. But you see what had happened was that they were starting to withdraw because they were getting into the toxic family kinds of reactions. And the other thing was I think they didn't know how to handle the boy's coming independence.

C2: The developmental issue.

C: That's right. So I said, when you go out for coffee, you talk about how you want your adolescent to relate to you and what are the rules. (Parenting Skills) Because they were very unclear. As long as they were small, fine and those kids were beautiful, they told them what to do etc. They had very different ideas. The dad was extremely sensitive; he talked about not being spoken to by his dad, and knows that he speaks with his son a lot more, but he said, "I'm doing it partially because I still don't do it enough and I want him to be even more supportive with his son." So a very caring, loving family, but needed things reframed. First of all needed it normalized that they weren't bad, that they were alright. (Normalizing) Next, that this was a natural kind of thing that they could work on on their own; in fact I gave them some reading material. (Normalizing) gave them a couple of interventions, and then asked that if they needed another appointment that they could call me or I'd be talking with the boy. Now, I checked with them four days after. The behavior problems had stopped totally in the classroom. And he had been doing things to really bug teachers, like jumping on a girl and pretending he was you know..., and all kinds of things. He had regressed, the teachers really noted regressive behavior. And again I reframed that. "That was wonderful because you knew your family needed some help". And he brought the family in. (Reframing)

I: So the interventions that you said you gave the parents, are those the ones where you said to get together and talk about the parenting?

C: To get together and talk about the parenting, and there again, you know from the other one it was talk about the relationship more; this one it was more deal with the parenting issues. (Parenting Skills) They seem to have a very healthy relationship as man and wife, but what's happening is that the parenting differences and the mother being tired; again we have a tired mother who you can see is dressed to the nines, works a full-time job, and has to come home and look after a huge house in Pineview, you know. So we talked again about having family meetings and I sent home the contract sheet I use for responsibilities for each person in the family. (Realigning structure) So that they each have the responsibilities again to help the family. Everybody in this family needs to help in order to have a happy family, and so everybody needs to work. And that's how you get the adolescents; I'm finding the easiest way to get the adolescents to buy back into the family is to get them to do some work in the family. They feel good.

I: To make them actually feel like they're needed.

C: Yeah, so that one I can see that they can go a long way on their own. I'll be checking up on them through the boy. And we ended the interview with a big kiss and hug with each parent. This is the nice part of this work. And the family just left feeling like they had gone to heaven.

I: I bet you felt good.

C: That was a good one. I needed it that week. That was wonderful from a kid whose teachers were worried about suicide or whatever, and I don't think that was an issue, but he was calling attention. But it was just one family session, and the parents knew, but they didn't know how to stop it. Now I'm finding the kids are coming and saying, "Yeah, yeah, see my parents, make it better. We want it better at home".

The counsellor in this case received the message from the boy that his mother may not be comfortable with a counselling session. She therefore focused on joining with the mother to help her to feel more comfortable, and to allow her to speak freely. As the counsellor could see that the parents were aware of the situation, she felt comfortable clarifying the dysfunctional dynamics of the situation. Further counselling was recommended at an outside agency, but the parents preferred to come back to the school.

The counsellor felt that the mother seemed isolated from the father-son subsystem. As they might have viewed her behavior in a negative light, she would reframe the behavior of the mother in a more positive light, so that they would not continue to see the mother's behavior as the problem. Changing the situation of the problem from being with one person to that of being with the family helps each family member to assume more responsibility for change.

After altering the family members' perceptions of the problem, the counsellor felt they were ready to be receptive to an intervention which would realign the organizational structure of the family. The counsellor created four versions of this type of intervention. Two to bring the whole family closer together, one to bring the adolescent boy back into the family, and one to help strengthen the parental subsystem. Throughout the session the counsellor made use of interventions which normalized the problem and taught parenting skills. Near the end of the session the counsellor reframed the boy's behavior as being positive. Since he was the family member who displayed the symptoms it was important to alter the negative perceptions that parents and teachers may have developed towards him.

Case #2

In the following case the counsellor began assessing the situation through conversations with the child's teacher and mother. This contrasts with the first case in which the counsellor received the needed information from the student himself.

I: Now could I get you to describe an incident, the details of which come readily to your mind, in which you used a systemic intervention with a student?

C: So you'd like me to talk about one of my case studies.

I: Yes.

C: There's a little kindergarten child that was referred because all of a sudden his behavior seemed to have changed. When he first came into the classroom he was a model student. Then about two months after the start of September his teacher and his mother started to notice a lot of changes in his behavior. He became very defiant,acting out in class, climbing onto the sandbox, doing all sorts of things that he shouldn't have done. After talking with his teacher and his mom and getting a little bit more information about him it turned out that he was going through a lot of changes at home. For example he's had a little baby sister who had been born a month or so earlier, his dad had been working out of town, and his mom was just there with the baby sister and him; his mom was no longer going to work everyday. So there was a lot of change going on within the family and this seemed to be a reaction to what was happening at home.

I: So how did that first come out when he first came to talk to you?

C: It came out more from talking to his teacher and his mom.

I: Did his teacher refer him to you initially?

C: Yeah, she was the first one but then shortly afterwards his mom came in to see me too. She was experiencing the same problems.

I: So she kind of initiated some action on her own.

C: Yeah. She did.

I: So it sounds like you talked to the teacher, then Mom came in, and then you saw the little boy?

C: Uh-hum.

I: What kinds of things did you do that might be labelled as systemic?

C: Well first of all I reframed the problem. So rather than being this naughty little boy who was acting out I reframed it as he was having difficulty coping with family change. (Reframing) You could see the lightbulb sort of went on with Mom when I said that. Things sort of clicked into place. So we did various things at school and at home. For example at home his mom made sure that he had some individual time with her. When the baby was asleep or whatever, she would spend some extra individual time with him. (Realigning Structure) At school he came to see me and he really seemed to like that. (Joining) He was a very bright student. That was another thing, his teacher hadn't realized how bright he was. In fact she wanted me to test him because she thought he had some kind of learning disability. (Recommend Counselling)

I: Because of his behavior?

C: Yeah. It turned out that he was a very bright boy, very superior I.Q. in fact. He was just underchallenged and bored with what was happening in the classroom. (Reframing) So that was another factor. So we made sure also that he had some challenging kind of things. But he really seemed to like the stability of coming to see me. He came for five minutes everyday after recess and we would just talk about whatever was on his mind. (Joining) He really liked that.

I: Do you think that he was really missing the attention? Mom had a new baby...

C: Yeah, he was missing that as well.

I: So you got Mom to spend some alone time with him.

C: A predictable time each day (Realigning Structure) and try to keep his routines the same as much as possible so that the change is minimized. (Parenting Skills) Also Mom had never really had to do much of the disciplining before. She now had the role of family disciplinarian which Dad had always had while he was at the home. But he was working out of town for a few months, so she had to take over this role. So we used Dreikurs kind of model of natural and logical consequences and I worked a little bit on parenting with her. (Parenting Skills) The major problem she had with him was getting him ready for the bus on time in the morning. He would dilly-dally all the time. So we used the natural consequence one morning of letting him miss the bus and then he had to spend the morning in his room. (Parenting Skills) That worked really well. After that he got ready lickety-split. So we worked some on helping Mom be more comfortable with her role as a family disciplinarian. We worked on the bus thing and other things too. (Parenting Skills)

I: So when you did the reframing with Mom and suggested spending time with the boy everyday, was the boy in the room at that time or was that just with Mom?

C: That was just with Mom.

I: Did you ever reframe the little boy's behavior with him or did you work on a different angle with him?

C: I didn't reframe it with him. Sometimes he came to see me with Mom, especially during the initial stage when he was very defiant towards Mom.

I: So you worked on some things with them.

C: Yeah, it was kind of interesting at the start because that's what was happening together. You could see that he was a powerful member of the family at that time. Together he more or less had her wrapped around his little finger. And she felt very uncertain as to what her role was as a disciplinarian.

I: Do you think he had kind of put himself up in Dad's place since Dad was gone?

C: Could be. A kind of parental-child kind of thing as well, especially with being a very bright little boy and very verbal.

I: Did your interventions work do you think?

C: Uh-hum, I think so.

I: What kinds of things led you to believe that they worked?

C: We also had some kind of behavior mod thing in the classroom whereby if he behaved well that morning he got a happygram that went home and if he collected five happygrams throughout they would go off to Bullwinkles or whatever he really liked. (Behavior Modification) So the number of happygrams started to really increase. I phoned Mom pretty often to keep in touch with what was happening with things and found that they improved. After awhile his dad came back and of course that really helped. Then there was another family change; his mom went back to work after she had taken her maternity leave, so then there was kind of a relapse there. So we had Mom and Dad in and a nanny came to live full-time in the home, so that's another thing that happened. Some of the things we had in place we had dispensed with when things improved so we had to go back to doing the behavior mod thing and all of that. And then things improved again. But it seemed whenever there was some sort of disruption in the home it really threw him off.

I: So this thing about having him spend some time together, was that effective?

C: I think so. When Dad came back he took over the role of that. Every Wednesday evening he and Dad would do something together and the little boy got to choose what it was, and that seemed to work very well. (Realigning Structure)

I: So did the parents give you any feedback about how things were working?

C: Yes, I kept in touch with Mom fairly often because she would fairly often come into the school and pop into my room to let me know how things were going.

I: So she told you that things were better.

C: Yeah.

I: Do you think the impact, or change in the little boy was a result of the interventions you used, like the reframing and redefining of boundaries?

C: Well partially; there may have been other factors to it, I can't claim all of the credit.

I: But you think that was fairly effective.

C: Uh-hum, I think so.

I: Did the use of systemic interventions affect the relationships between the family members? It sounds like Mom and son might have gotten a little bit closer, is that true?

C: Yes, I think so. I think the son was viewed more positively with the reframe, you know coping with family change rather than my son's suddenly turned into a little nightmare. It's almost a relief for Mom to think, "Wow, this is what it is. It's not that he's turned into some sort of horror".

I: It's nice for them to have some different alternative ways of looking at things. And how about between Mom and Dad. It seems to me that she had never been the disciplinarian before. Do you think this had any effect on their relationship, maybe a little bit more even parenting or something like that?

C: I think so; especially when Dad came back he was taking on some more of the individual time. It sounded as though Mom and Dad were sharing this now.

I: So you assessed the effect of the intervention. The teacher obviously reported to you that there were more happygrams and you talked to the parents. So there was a change in the classroom as well as at home.

C: Yes, we were going to refer to the B.D., behavior disorder specialist at one point. That takes so long though, three months of waiting. But then when we finally got to the date we just decided, well there's no longer any need for this. Why bother?

I: So how many interviews would you have had with the little boy, his mom and his dad?

C: The little boy I say every day for five minutes.

I: Are you still seeing him?

C: No. It started in November and throughout the year he would just pop in until about now, January. He was a neat little kid; he would come into my office and cross his legs over like a little leprechaun, and he had beady bright eyes. I really enjoyed him popping in for a few minutes to let me know how things were going. So I think it was very positive all around.

I: So it was nice for you too. How many times did you see the mom?

C: It's hard to say. Probably about five or six times. Sometimes it was sort of a lengthy thing, sometimes it was just standing at the door. Quite often I would phone her up. When she went back to work it was harder for her to come in, so I would phone her up fairly often when she was at work.

I: She sounds like she really saw you as a good resource to use. You saw the mom and the dad a few times?

C: Yeah, the dad came in once for an interview. I saw them at the Meet-the-Teacher evening and they were really glad that things were going so well. It is a complete turn around for this kid.

I: Did he have any other brothers and sisters besides the baby?

C: No, that's all.

I: The teacher made the referral, and the reason was that he was acting out in class?

C: Uh-hum.

I: What were the family interaction patterns around the problems? At home he would kind of be defiant towards his mother...

C: Then she would really reinforce his attention-seeking behavior by scolding, lecturing, and giving lots of attention for whatever he did wrong. And the teacher did the same in class. She would spend ten minutes berating him over this. He would almost enjoy it. Rather than ignoring the little things or sending him in to sit on his own or whatever. She would lay on the attention.

I: At what point in the case did you make some interventions?

C: I was working with a consultant at the time and every week we would talk about the cases that I had here and that was one that I talked about. She gave me a lot of direction.

I: So was it the first time that you saw the mom that you reframed?

C: Well I saw the mom, I saw the teacher, I saw the child and then I talked about it to my consultant and she gave me some guidance.

I: How did other concerned parties, teachers and staff, react to the use of your interventions?

C: Positively.

I: So you feel like you get support from the staff in dealing with parents and families?

C: Definitely.

I: So that whole thing seemed to work out very well.

In this case the boy was identified by both the teacher and mother as having a problem. The counsellor recognized that she must immediately change the perceptions about the boy in order to help the mother alter the interaction patterns around the problem. As a naughty boy, she may want to scold him. But as a boy having problems coping with change, it is more likely that she will want to help him, and thus be more receptive to any suggestions the counsellor gives, or even come up with some herself.

Some of the changes in the family were ones which might have left the boy feeling a bit disconnected (new baby, dad working elsewhere). Therefore the counsellor and the mother developed an intervention which would realign the structural organization of the family, bringing the mother and the son closer together. The counsellor also joined with the boy at school in order to help give him a feeling of support at school.

The symptoms were first thought by the teacher to be signs of a learning disability, so psychoeducational assessment was recommended. As the results of the testing proved negative, the counsellor reframed his behavior as a sign of being underchallenged.

Upon examination of the dynamics of the parental subsystem, the counsellor found that the responsibilities had been unequal up to that point. She therefore taught parenting skills throughout her contact with the mother. This would help the mother to feel more comfortable with her new role, as well as help to change the dynamics around the problem. When the father returned, new interventions to realign the organizational structure of the family were developed to meet the needs of the new system dynamics.

Finally, another behavior modification intervention was used in the classroom. This served to realign the structure of the school and family system because the teacher was spending more positive time with the boy (giving him happygrams), and the parents were spending more positive time with him (going to Bullwinkles).

As seen through these two case examples, interventions were used together in a variety of ways and for a variety of purposes. Interventions which are not traditionally thought of in relation to family systems theory were used in conjunction with those developed especially for this theory, but always within an overall family systems framework. The counsellors always kept in mind that the problem existed within the context of the family, never within the individual alone.

There were five broad categories of interventions used as a springboard for new interventions, but there was no specific recipe for using them. Each counsellor created interventions falling within one of these categories, but which were individual to each case. Within most of the cases, it appeared that there was more than one factor at work which contributed to the problem. Therefore the counsellors tended to use a variety of techniques carefully blended with one another to create change in the system. The end result could not be predicted exactly, as this would be a product of how the family spontaneously adapted to the change produced.

Perceived Impact

The purpose of this study was to determine how school counsellors apply a family systems framework to their work with students, focusing on the specific forms of interventions which appear to have impact. Up to this point the summation of results has included a description of categories of interventions used by the counsellors and a description of how different forms of interventions were used together within a family systems framework. These topics are important because they give us an idea of how the school counsellors applied a family systems framework to their work with students in the school setting.

Although the forms of interventions have been determined, it has not yet been determined whether they appear to have impact. This section provides a description of the perceptions of the counsellor participants with regards to impact as a result of their use of interventions within a family systems framework. This information leads to conclusions about not only the applicability of a family systems framework in the school system, but its effectiveness as well.

When exploring the perceptions of impact as reported by the counsellor participants, it is important to keep in mind the types of cases described and the types of interventions used because the counsellors were not describing their perceptions of impact in general. Rather they were describing their perceptions of impact in these particular incidents with these particular kinds of interventions.

The use of the word "impact" here refers to any change related to the problem situation which occurred. In the cases described by the counsellors, all descriptions of perceived impact consisted of positive changes in the situation. Although some counsellors described situations in which they felt there was no impact (no change in the situation), there were no descriptions of impact in which there occurred negative change in the problem situation.

As most of the counsellors used a combination of different kinds of interventions within a single case, it was generally difficult to discover the perceived impact of each individual intervention. Therefore, each case was examined as to the overall perceived impact. Upon examination of the fifteen cases described by the five counsellors, it was found that all the counsellors perceived some impact as a result of their use of systemic interventions in each of the cases.

Some of the counsellors described cases in which they perceived an overall impact, but which contained one intervention that had no perceived impact. These were found in cases in which impact was perceived as a result of other interventions used. There were eight situations in which an intervention did not appear to have impact. Five of these interventions fell into the category of the counsellor recommending further counselling. In five of the eight times that counsellors recommended further counselling, it was not acted upon by the family. The incidents in which a recommendation was not acted upon were the following: the counsellor asked the mother to bring her husband with her for a session; the counsellor asked the family to bring another family member with them the next time they came in; the counsellor suggested to the student that her family go to an outside agency; the counsellor asked the mother to come in alone for another session; the counsellor suggested to the mother that the parents and the student go elsewhere. The incidents in which an impact was perceived as a result of a recommendation for further counselling included the following: the counsellor suggested to the parents and student that they come back to her for a second session; the counsellor suggested that the school consultant see the student alone; the counsellor recommended to the mother that the whole family go elsewhere for counselling.

It seems that more recommendations were not acted upon when they did not involve the student, i.e. suggesting mother, father, or another family member come in. Other than this, no recurring factors were found in recommendations which were followed through compared to those which were not.

These are factors which were not explored in this study, but which might have influenced the families' decision of whether to act upon a recommendation: the dynamics of the problem, the phrasing of the recommendation, or the timing of the recommendation.

There were three other situations in which an intervention did not appear to have impact. The first was that in which a counsellor had been working with the child, but had not been using a family systems framework. That is, they had not been viewing the problem and their interventions within the context of the child's family system. One of the five counsellors expressed that while working with either the child or the child and the parents within a linear framework, giving support and empathy, there was no perceived impact. In this case, when the counsellor began thinking systemically and involving the child's system(s) in the problem and solution, there was a perceived impact. This counsellor explains:

> "It took about six or eight months before I realized. What I tried to do was continue this, I would just work with the girl in a group situation to make some impact. Then I realized that the problem was not the girl directly, it was that the whole system needed to be coordinated, needed to be playing the same game...When we got the system working together then the girl seemed to respond. One of her comments the other day was, "I have to work more but I'm a lot happier"."

The second situation was that in which the counsellor tried to clarify the dysfunctional dynamics around the problem by asking the child to do family drawings and to talk about them. She found that when she met with the boy's mother she got a more rounded picture of the dyanamics.

In the third situation, which involved the same counsellor, the counsellor tried a behavior modification intervention within a family systems framework to help a boy complete homework assignments. The intervention involved the boy bringing his homework book to the counsellor each week. If his homework had been completed he would receive a star and if he received a certain number of stars, he would get a reward from his mother. The boy frequently lost his book, and she found that the mother did not participate as fully as expected. The counsellor noted at the end of her description that there had been an impact in the situation, but attributed this impact to another intervention that was used, realigning the structural organization of the family.

Aside from these eight situations, all the interventions described by the counsellor participants appeared to have impact upon the problem situations with which they were working.

The counsellors' perceptions of impact or lack of impact as a result of their use of family systems interventions was based on a variety of data. All of the counsellors based their perceptions at least in part, on their own observations of the child's behavior at school, as well as the interactions of the family members after the use of an intervention applied within a family systems framework. In most cases the counsellors used other sources of information as well. In only four of the fifteen cases did counsellors not seek other sources of information on which to base their decision on whether their intervention had impact or not. Three of these cases involved the same counsellor.

The counsellors stated that they also consulted the child's mother and/or teacher as to whether their interventions had any impact. These two sources were cited at equal frequency rates. Two more sources which were consulted less often than those mentioned above, but with the same frequency were both parents together and the student himself. One counsellor mentioned that she had consulted another family member (a brother) as to whether there was any impact as a result of her interventions.

Themes of Problem Dynamics

There were seven themes which emerged from the data describing broad, underlying themes on the types of problem dynamics which were presented in the transcripts. These themes were characterized by a description of the interaction within the child's system, rather than a description of the specific symptoms in each case. The themes were not mutually exclusive; therefore, each case could not be classified as to which specific theme of problem dynamics it contained since each had more than one theme running through it.

The problem dynamic themes which emerged were referred to as Power, Parental Child, Distance, Transition, Inconsistent Parenting, Anger at Parent, and Manipulation. The titles and descriptions of these themes are based on family systems theory. A more detailed description of each theme follows.

Power

The problems described by this theme were characterized by a child who was trying to gain more power in the system (not having enough power), or by one who had too much power in the system.

Parental Child

Problems which had this theme running through them were found to have a child who had taken on a parental role, either as father or mother, in the system. The child may have acted as a spouse in a marital relationship, or may have switched places with a single parent, thereby creating a situation in which the child acts as parent and the parent acts as child.

Distance

This theme describes a situation in which more or less physical or emotional space was needed between the parent(s) and the child. There were cases in which the child needed more closeness to a parent. In Minuchin's words, the parent and the child were thought to be disengaged. The theme also characterized problems in which there was not enough distance between a parent and child. The two were thought to be enmeshed.

Transition

Situations which contained this theme were those in which a child was simply not coping well with family change. Transition was attributed to various conditions such as divorce, remarriage, new baby, parent returning to the workforce, or parent leaving the workforce.

Inconsistent Parenting

This theme described situations in which one parent appeared to have been undermining the parental influence of the other, or in which one parent deferred parental duties to the spouse. It may also have been characterized by inconsistency in discipline or expectations on the part of the parents.

Anger at Parents

In problems containing this theme, there was a child who seemed angry or defiant towards one parent. There were also situations in which the child may have been allying with one parent against another.

Manipulation

In this situation, there was found to be a child who was going between other system members and manipulating the situation to his/her advantage.

Upon analyzing the transcripts, it was found that the above-mentioned themes did not appear in the case descriptions at equal rates. The theme of Power occurred in ten of the seventeen cases. The dynamics of this theme were that the child was found to have either too much or not enough power in the system. The second most apparent theme in the counsellor case descriptions was that of Anger at Parents. This theme appeared in seven of the seventeen cases. The themes of Parental Child and Distance had equal rates of occurrence. They showed up in six of the seventeen cases. Themes showing Inconsistent Parenting, Change, and Manipulation were found in very few cases.

When looking at the kinds of interventions used and the themes of the problems, it seemed that certain kinds of interventions were used more often in cases which contained a particular theme. Table 3 (p. 108) provides a summary of the interventions which were used with each theme of problem dynamics, and how often each was used. The interventions which were used most often in

Table 3

Frequency of Interventions Used With Problem Dynamic Themes

Interventions	**Theme**						
	Power	**Parental Child**	**Distance**	**Transition**	**Incon. Parenting**	**Anger**	**Mat**
Reframing	15	6	2	2	3	6	4
Realigning	16	7	8	4	7	10	0
Collaboration	5	0	0	1	0	1	5
Clarifying	15	4	5	2	3	12	1
Logical Extension	2	0	0	0	0	2	0
One-down	2	1	0	0	0	1	0
Continued Symptom	2	2	1	0	1	1	1
Accessing Changes	1	0	0	0	0	0	1
Joining	15	4	2	0	3	5	3
Recommend Counselling	7	4	2	1	3	2	0
Parenting	5	4	0	2	1	2	0
Communication	1	0	1	0	1	2	0
Normalizing	5	0	0	0	2	3	0
Behavior Modification	5	5	1	2	0	1	0

* The abbreviations in this table are as follows: Incon. - Inconsistent; Manip. - Manipulatio

cases which involved a child having too much or not enough power were those of reframing, realigning, clarifying, and joining. In cases which involved a parental child, reframing and realigning were used more than any other form of intervention. Where there was too much or not enough distance between a child and his/her parent(s), the counsellors most often used an intervention which served to realign the organizational structure of the family. In cases which dealt with a family trying to cope with transition, the counsellors most often tried to realign the organizational structure. Again, the preferred intervention was realigning the organizational structure of the family in cases which were characterized by inconsistent parenting. When the cases involved a child who was angry at a parent, the counsellors tended to clarify the dysfunctional dynamics and realign the organizational structure of the family more than any other intervention. In cases which involved manipulation on the part of a child, the preferred form of intervention was that of establishing consistency between systems.

It is evident from this data that the counsellors did not consistently use the same form of intervention for problems with different dynamics. Although there were four forms of interventions which the counsellors used more than any others, they seemed to use the various forms of interventions in accordance with the underlying theme of dysfunctional interaction patterns surrounding the problem.

An attempt was made to determine if there were certain themes associated with cases in which there was impact or no impact as a result of the use of one of the interventions described in this study. It was found that although the theme of Power seemed to be prevalent in cases in which no impact was perceived, it is likely because it was the most predominant theme in all of the cases. Aside from this, there was not one theme that appeared a great deal more often than the others in incidents of no impact as a result of the use of an intervention within a family systems framework.

Involvement of System Members

At the commencement of this study, it was hoped that it could be ascertained as to what forms of family systems interventions the counsellor participants used with their students. It was apparent from the literature that one could use a family systems framework while working with only one system member (Young, 1979). It was also thought to be likely that school counsellors would prefer to work with the student alone, as it would fit well with their time, space, expectations of staff and administrators, and the more traditional counselling methods.

In this study, it was found that the counsellor participants did not prefer to work with the student alone. Most of them preferred to involve other family members, especially the parents, in the assessment and intervention stages of counselling. One counsellor states, "That boy, I could meet with him and meet with him and I would never have gotten that. I feel you just have to get that parent in to get the complete picture in order to make any...It saves you a lot of time in the long run".

Table 4 (p.111) shows the number of times each counsellor had contact with the student alone, the mother alone, the father alone, the parents together, or the family together for each of her cases. The term "family" refers to the student and one or more family members. Some of the cases involved families in which one parent was not available because of reasons such as separation, or work away from the home.

Table 4

Frequency of Other System Members Involved in Assessment and Intervention

Counsellor and Case	Student	System Members Involved M	F	Parents	Family
Counsellor #1					
Case 1	1	4	0	0	1
Case 2	6	1	0	1	1
Counsellor #2					
Case 1	3+	0	0	3	2
Case 2	2	1	0	0	1
Case 3	1	0	0	0	3
Case 4	2	1	0	0	0
Case 5	2	0	0	0	2
Counsellor #3					
Case 1	4	0	0	1	1
Case 2	1	1	0	0	0
Counsellor #4					
Case 1	5+	5	1	1	1+
Case 2	7	3+	0	0	0
Case 3	1+	1	0	0	0
Counsellor #5					
Case 1	4	2	0	0	0
Case 2	2	1	0	0	1
Case 3	1+	0	0	1	0
Case 4	1+	1	0	0	0
Total	**43**	**21**	**1**	**7**	**13+**

It is evident from this table that the counsellor participants worked mostly with children on an individual basis, as was expected. It was also found that the counsellor participants worked more often with the mother alone or with two or more family members than the father alone or with the parents together.

Counsellor Perceptions of Family Systems Interventions

During the individual counsellor interviews and during the group meetings, there were sometimes concerns or opinions regarding the use of a family systems framework and interventions which were reiterated by more than one counsellor participant. These counsellor comments are referred to here as general counsellor perceptions of family systems interventions. They are summarized below.

In establishing the aim of the critical incident interview, three questions were asked of each counsellor to get her thoughts on the use of family systems interventions in the school system. Again, the term "family systems" was replaced with "systemic", as the counsellor participants seemed more familiar with this term as meaning the same thing.

The first question, "What kind of systemic interventions come to mind when you think about systemic counselling?", elicited a variety of responses. Although the counsellors named a wide range of interventions, such as setting boundaries, teaching parenting, prescribing the symptom, disrupting patterns of interaction, etc., most of the counsellors emphasized that they believed that any intervention which involved the family would be appropriate in family systems counselling. While all the counsellors in this study preferred to involve the parents of their students in the assessment and interventions, it was noted that any intervention, even when used with the child alone may be classified as systemic because it will have an impact in the student's family system. One counsellor termed this the "ripple effect", explaining that an intervention never affects just one person.

The second question was, "What criteria do you use in order to determine whether to use systemic interventions with a client?" Most of the counsellors said that they always use a systemic framework with their cases, because even if the intervention is not one specifically developed for family systems theory, it will still have implications for the family. One counsellor notes, "...if you are viewing something from a systems perspective, not as a problem that's within the child alone, even a learning disability, the child may have a real problem in writing, but that has to interplay with everything else that's going on in their life. And it affects other people and other people's responses to that affect the child and how they view that problem."

Even when applying a family systems framework, the counsellors noted that the nature of the problem is also taken into account when deciding whether to use an intervention specific to family systems theory. A few of the counsellors pointed out that a common issue in which they use a family systems intervention is that of adolescents individuating from the family. With problems that are developmental, psychoeducational, or physical, an intervention developed specifically for family systems theory is less often used.

When looking at whether to work with a child alone or with the family, some of the counsellors noted that they look at the age and strength of the child. With younger children they will tend to call in the parents, but with older students they might work with them alone more often to intervene in the home. On the whole the participants in this study preferred to involve some other member of the family in treatment as well as the student. They felt that assessment of the dysfunctional dynamics and change could be arrived at much more quickly and easily when working with more than one member of the system.

The last question asked of the counsellors to assess their thoughts on the use of family systems interventions was, "How do you feel about using systemic interventions in general?". Most of the counsellors indicated that they felt very comfortable using systemic interventions, that it is a part of them. Although a few of them stated that they had always worked systemically but just hadn't labelled it as such, some indicated that when they first began counselling in the schools they did not use the family systems approach. With experience they began to believe that they were missing a great deal if they did not look at the child's family system.

One counsellor noted that because she has been working in this way since she began counselling at her present school, the students and parents were also very comfortable with the use of a family systems framework. She indicated that it is very important to get the parents to begin thinking systemically as well.

Aside from the comments resulting from the previous three questions, there were also various other comments which revealed the counsellor participants' perspective on the use of family systems interventions. These comments emerged through more casual conversation during meetings and interviews. They are summarized below.

All the counsellors felt support from the teachers with whom they worked. One counsellor explains, "Teachers like that (family systems approach) because it seems to always be the school that's the problem and we take a look at what's happening at home. So they are very supportive because the focus isn't on them". In situations where there is some tension between the school and home, the counsellors indicated that the use of a family systems framework is very appropriate. It uses a non-blaming philosophy and facilitates cooperation between these two systems so that they begin working together for the child's sake. When working between two systems or within one system, the counsellors felt that their role was to be supportive to each system member and to facilitate cooperation and change.

In regards to administrative support, a few of the counsellors noted that their school administrators had a primary focus on testing and wanted family cases to be referred elsewhere. As the counsellors revealed they generally work from a family systems perspective, they indicated a feeling of pressure as a result of this. They indicated that in order to cope with this dilemma, they try not to see a family more than two or three times, especially during the months of February and March, when the school emphasis is on Special Education referrals.

It was also noted that there are a number of constraints which make it difficult to work with the family (as these counsellors preferred to do) within the school setting. The first constraint which was mentioned by the counsellors was the difficulty in getting the student's family members to physically come in to see the counsellor. One reason for this was that many parents hold full-time jobs and cannot come in during school hours. Another reason was that there was sometimes resistance on the part of parents to admit that there was a problem or to view the problem systemically. The counsellors felt that it would be easier to use this framework in a clinic because the family would have to come to you for help, therefore taking the first step in realizing there was a problem and wanting to work on it.

In the school setting when a child is referred by a teacher, it is sometimes difficult to get family involvement because they want the counsellor to treat the child on his own. The counsellor participants felt that they must first get the parents to come in and convince them there is a problem which should be looked at systemically before even beginning any interventions. This may be why most of the counsellors used joining, reframing, and clarifying dysfunctional dynamics interventions as beginning interventions with their cases. These forms of interventions all help to alter perceptions about the problem.

If the families are willing to participate in the resolution of the problem, the counsellor must then contend with other constraints. One of these constraints mentioned by the counsellors is space. Most schools are not equipped with appropriate rooms for small group interviews. Some of the counsellors noted that their offices were usually too small, and a classroom may be too formal.

Another constraint brought out by the counsellors was that of time. They felt that to work systemically required much more time, organization, and energy than other methods. With families whose members are resistant they felt it important to spend a lot of time joining with them to increase the chances of cooperation. Sometimes sessions involving parents/families would run for an hour or an hour-and-a-half. They also felt it important to follow-up on each case, but that there wasn't a great deal of time to do that. Some of the counsellors indicated that when they didn't have time to follow-up with the parents, they would check with the teachers and/or the student himself.

Although they all felt that the systemic method required a lot of time and energy, it was also noted that in using systemic interventions, you do not need to see the family all the time. When working within a linear framework, a counsellor might see a child individually once a week for six to ten weeks. When applying a family systems framework to their work with students, the counsellors noted that they saw the child and parents/family on the average of three times.

A few of the counsellors also mentioned that when switching from a linear to a family systems perspective, change happened very quickly. Two counsellors reported cases in which they had been working within a linear perspective and perceived no impact. When they switched their framework to a systemic one, change came within a few weeks.

On the part of the counsellors, it was noted that working systemically was often very rewarding for them personally. They seemed to feel a sense of accomplishment from sensing that there was a real change made in the family interactions, rather than trying to change a child at school and sending him home into dynamics that have not changed. One counsellor provides an example, "And we ended the interview with a big kiss and a hug with each person. This is the nice part of the work. And the family just left feeling like they had gone to heaven. That was a good one. I needed it that week. That was wonderful from a kid whose teachers were worried about suicide or whatever...But it was just one family session, and the parents knew, but they didn't know how to stop it".

One of the drawbacks in this framework that was mentioned was that the counsellors felt it difficult to ascertain whether the change in the patterns of interaction or the change in the symptom was due to their systemic interventions. They felt that, as in any other form of counselling, it was very hard to measure whether it was their interventions which produced a change or whether there were other intervening factors. Rather than using any form of measurement the counsellors must rely on their feelings and perceptions to decide on whether they had an impact.

CHAPTER FIVE

DISCUSSION

The discussion chapter is organized into five sections. In the first section is a summary of the findings of the study. These findings are explained in relation to the current literature. In the second section, the limitations and delimitations of the study are discussed. Section three includes a review of the implications of this study for practice, training, and research, and in section four recommendations are given. A concluding statement is found in section five.

Summary of the Findings

The purpose of this study was to investigate how school counsellors apply a family systems framework to their work with students. A sub-goal of the study was to determine the forms of interventions used by school counsellors within a family systems framework which appear to have impact.

Upon analyzing the transcripts from the individual interviews and group meetings with the five counsellor participants, fourteen forms of interventions used by the counsellors were identified. These were then grouped into five broad categories. The first seven forms of interventions were grouped together under the title of family systems interventions in that they are closely associated with the systems approach to working with families. This category included the following forms of interventions: joining, reframing the symptomatic behavior; realigning the organizational structure of the family; clarifying the dysfunctional dynamics of the family; logical extension statements; taking a one-down position; suggesting continued symptomatic behavior; and assessing changes that are safe.

The next four categories of interventions are not typically associated with family systems theory, but were used here within a family systems framework by the school counsellors. These categories included enhancing collaboration between systems, recommending further counselling, teaching, and behavior modification. The category of teaching included: teaching parenting and communication skills, and normalizing.

These results show that the counsellor participants did not simply use family systems interventions with their clients. They used interventions which had been designed especially for work with family systems as well as interventions which are usually associated with linear or individual frameworks. What was interesting about this usage was that all these interventions were used within a family systems framework. That is, the problem was viewed within the interactional context of the family, and the goal of the interventions was to make impact on the dynamics of the family.

The notion of incorporating individual or linear concepts into systemic models of therapy is supported in the writings of Held (1986). She suggests that both circular and linear concepts can be used within a systemic framework because the characteristic of linearity or circularity is only attributed to concepts by therapists. It is not inherent in these concepts. Held explains:

> "If, however, the "linearity" resides in how the constructs of a model are viewed and used, then the "linearity" or "circularity" resides in the attitude of the therapist (or viewer) and not in the construct or model." (Held, 1986, p.224).

What makes the therapy "linear" or "circular" is not the content or constructs used to describe patterns at individual versus interpersonal levels, but the process of thinking that guides the organization of the therapist's observations. This line of thinking implies that if counsellors are working within a family systems framework; that is, working to create change within dysfunctional family dynamics, they can feel free to borrow interventions from other therapies, including those known as "linear" or individual. Even though they are borrowing ideas from other individual therapies, they are now placed in an interpersonal frame because of the systemic framework from which the counsellor is operating.

Held indicates that the strategic/systemic model of systems theory would be appropriate as a general framework within which to work. This model offers guidelines on how to interrupt and change problematic and self-defeating patterns of behavior. It is a therapy in which the clinician designs an intervention to fit the problem. Held suggests that the strategic/systemic model is a process model. If one uses the systemic and interpersonal process described in this model, then any content, even that described best by an individual theory, can be used as a basis for change.

The counsellor participants in our study tended to use reframing, one of the primary intervention strategies of strategic/systemic therapy on a number of occasions. But they also pulled in concepts and intervention methods from other models of family systems theory (Minuchin,1981; Fisch, Weakland, & Segal, 1982), as well as from more traditional theories such as behavior modification. Although they were not strictly using strategic/systemic process as recommended by Held, they adhered to the principles of family systems theory within which they were able to use more traditional interventions. In this way, the counsellors working within the school system did not have to radically change the way they worked or change their role as perceived by themselves and others within that system. They were able to view problems and goals of therapy within an overall family systems framework without totally abandoning their previous methods of working, or without turning into family therapists.

As mentioned above, one of the fourteen forms of interventions which was used a lot by the counsellor participants within their cases was that of reframing the symptomatic behavior. It was noted that there were also three other "favorite" interventions which the counsellors used: realigning the organizational structure of the family; clarifying the dysfunctional dynamics of the family; and joining.

It is important to note that three of these four forms of interventions can be used in altering perceptions of the presenting problem or symptom-bearer. It seems that the counsellors felt it necessary to get the client and/or family to the point where they were viewing the problem in such a manner that they were motivated to promote change. In her four step process, Amatea, (1989) emphasizes this process of shifting perceptions in order to motivate the members involved in the counselling procedure. This form of intervention may be important to school counsellors in light of the comments made by the participants regarding the difficulty in getting families to see problems systemically when working from the school system, as opposed to working in a family services agency. As school counsellors, if we want to work with families, we must first convince them that the problem will be resolved most effectively through conceptualizing the problem within a systemic lens. Interventions which alter perceptions of the problem or symptom-bearer would be most helpful in this capacity.

The counsellors in this study chose a family systems framework as a base within which to conceptualize their cases and the goals of their interventions. They then integrated ideas and techniques from other therapies which they saw as "fitting" with how they were working. Thus, they have created a blend of various constructs and methods which come together under the umbrella of family systems theory. They used the guiding principles of a family systems framework for viewing problems and creating change, but then personalized the interventions according to their own personality, the problem dynamics, and the setting.

This process coincides with the current trends in counselling, according to Prochaska & DiClemente (1982, in Held, 1986). They note that

> "divergence has dominated the past decade of development within the field of psychotherapy...there is a Zeitgeist emerging in which theorists and therapists (dissatisfied with the limitations of their models)...are searching for common principles of change. Perhaps this is a move toward a higher level of convergence to balance out and integrate the divergence of the past two decades" (p.244).

Perhaps this is what school counsellors are finding they must do - create a useful model of change based on family systems theory while integrating ideas and techniques from various theories which have proved successful and with which they are comfortable.

Although the process described above seems rather personal and somewhat unstructured, there were some guidelines revealed in this study which other school counsellors can follow in applying a family systems framework to their work with students. Aside from providing examples of interventions which appeared to have impact on family dynamics, from which school counsellors can generate their own interventions, it was demonstrated how to use these interventions together to create a personal strategy for each case. As stated earlier, those interventions which were helpful in shifting perceptions about the problem or symptom-bearer were used most often. They were also used before other forms of interventions in order to make the client(s) more motivated and cooperative in carrying out other these interventions.

Among the interventions used by the counsellor participants within the framework of a family systems model, there is one that stands out from the rest. Enhancing collaboration between systems is an intervention that is slightly more "global" than the other thirteen interventions, as they have all been used exclusively with regards to the family system. The intervention of enhancing collaboration between systems deals also with the family system, but works to bring about continuity between this system and others which directly influence the student. The other system which was dealt with in this study was mainly the school system, but sometimes other service agencies were also involved. The use of this intervention implies that some of the counsellor participants believed that change needed to occur not only on the level of the family system, but at the "ecosystemic" level as well. Held (1986) supports this broader approach, noting in her writings that family therapists are now considering broader social contexts as relevant system components, instead of rigidly clinging to the familial system in isolation.

This position is supported by John Friesen (1983), who promotes what he calls an ecological approach to family counselling. Friesen notes that

> "School counselling is largely organized on an individual basis. Many school counsellors see their role as working with the individual student in educational planning, personal problems, and career planning" (Brown, 1980 in Friesen, 1983). "In such an individually oriented model, the family and parental concerns are largely neglected or at best dealt with sporadically and superficially. Similarly very little time may be spent in teacher consultation, community involvement,or even nurturing a healthy school climate. The counsellor with such an individually oriented model

works out of the office and conducts individual interviews with little regard for ecological factors operating in the student's life" (Friesen, 1983, p.5).

Friesen proposes a model of therapy in which the individual, the family, the school, and the community form an ecosystem, which is organized into sets of systems with varying levels of complexity. Each system is interdependent and adheres to the principles of general systems theory. This model proposed by Friesen is an adaptation of Bronfenbrenner's "ecology of human development" model (1976). Bronfenbrenner's model of human development is based on a complex hierarchy of interdependent systems, of which the relations between the individual and the environment in a certain setting is the lowest (microsystem), and the set of cultural institutions is the highest (macrosystem). The integral principles which pervade this model are interaction and reciprocity.

Friesen applies Bronfenbrenner's model to family counselling in what he refers to as an "ecologically oriented family counselling program" (Friesen, 1983, p.13). It includes a wide range of techniques drawn from a variety of theories, all applied according to the philosophy and goals of systems theory. "All the interventions are designed to foster growth inducing patterns of interaction within and around the family system" (Friesen,1983, p.13). This may include looking at other smaller or larger systems, or levels of systems, which are related to the family.

Again, it is advocated that school counsellors use a family systems framework in their work with students, but they are encouraged to include other influential systems, and techniques from other theories which may be adapted well to family systems theory. Although the counsellor participants in this study were not instructed to do so, they seemed to naturally adhere to the positions of both Held (1986) and Friesen (1983). They utilized a family systems framework, but within that they worked with the systemic "level" which seemed appropriate and used the constructs and techniques which seemed effective to produce change in the patterns of interaction within and around the family system.

Following along the line of "using what works" or perhaps "using what fits", the counsellor participants in this study also tended to combine various forms of interventions together within each case. A sequence of interventions was sometimes used to produce change in the same pattern of interaction. For instance, the counsellors often found it beneficial to join with one or more family members, reframe the symptomatic behavior(s), and then administer an intervention, such as one which would realign the organizational structure of the family. In other cases, there was more than one set of dysfunctional patterns of interaction at work within or around the family, sometimes at different systemic levels. In these cases an intervention needed to be generated to fit each of these patterns of interaction surrounding the problem.

As noted above the family may not always be the most appropriate "level" of system to work with. At the commencement of this study it was expected that the counsellors would use interventions aimed at changing dynamics within the family system through working mainly with students. It was found that the counsellor participants preferred, in most cases, to involve other members of the student's family in the assessment and intervention procedures as well. The counsellor participants indicated that they felt they had a much more complete picture of the interactional patterns within the family if they had more than one member involved in treatment. They also indicated that change seemed to be attained much more quickly if other family members were involved.

In some cases both parents participated in counselling, but in most cases reported in this study it was the mother who was most involved. There was no clear reason as to why this was so. In some cases it was the mother who did not have a career outside the home, so it may have been more convenient for her to come in during school hours than for the father. In a few cases the father worked out of town and in another case the father refused to come in to participate in counselling. It may also be attributed to traditional sex role stereotyping. Mothers are traditionally associated with child rearing, so for some it would be appropriate that it would be the mother who comes in to meet with the school counsellor. This reasoning may have been in the background for either the counsellor or the parents of the student. In any case, if counsellors are to make an impact within the interactional patterns of the family, they must assess the dynamics of the family with the father included. The father may be an integral part of the problematic dynamics and should not be excluded from being an integral part of the problem resolution.

Upon asking the counsellor participants whether they perceived an impact as a result of the use of their interventions, it was found that the counsellors perceived some impact in all cases. Therefore, the examples of interventions which have been described in the results section are those which appear to have impact on problems in the school setting.

The process of asking the counsellor participants whether they perceived impact, instead of somehow quantitatively measuring the effects, may be viewed as very subjective and imprecise. The reasoning behind obtaining the counsellors' perceptions was two-fold: first, it was believed that counsellors would only continue to use the forms of interventions which they believed to be effective. Therefore, to ascertain which forms of interventions are most likely to continue to be utilized by school counsellors it is important to determine which interventions are perceived to be effective from the counsellors' viewpoint. Second, to quantify change would be a difficult if not impossible project. Held (1986) notes that, "If the psychotherapy "process and outcome" research has taught us one thing, it is an appreciation of the complexity - in terms of sheer number of variables, not to mention the artistic or creative component - that makes quantifying change such an elusive process" (p.252).

Although the counsellors gave their own perceptions of whether impact was achieved in their cases, their opinion was often based on various sources of information. The counsellors sometimes consulted the parents together or the child him/herself to determine whether there had been impact in a case. More often though, it was the mother or the teacher who was contacted to assess the effects of the interventions.

Within the cases in which an overall impact was perceived by the counsellor participants, there were sometimes individual interventions which were viewed as having no impact. These situations in which no impact was perceived were grouped into two categories. The first situation was that in which the counsellor had recommended further counselling, either from themselves or from nonschool agencies. This result is not surprising given that 20 to 50% of families fail to contact nonschool agencies upon being referred (Conti, 1975; Zins & Hopkins, 1981, in Braden & Sherrard, 1987). The number who fail to remain in treatment beyond the initial appointment is approximately 50% of those who actually initiate counselling resulting from a referral (Conti, 1973).

Braden and Sherrard (1987) recommend that school counsellors learn how to refer families to nonschool agencies using a family systems approach. They maintain that as families have a natural power hierarchy, that one person in the family has more power and responsibility in making decisions for that family system. Braden and Sherrard (1987) advocate a referral model through which the school counsellor uses the power hierarchy in making referrals to outside agencies. They note, "negotiation of support for the referral within the family hierarchy is likely to improve the success of any referral the school psychologist make to a nonschool agency" (p.518).

The school counsellor/psychologist must first determine who holds the decision-making power within the family system. Once access to this hierarchy is achieved, the counsellor must a) reduce psychological resistance to acting, and b) motivate the family to follow the recommendation. To do these things Braden and Sherrard suggest altering the hierarchy's perceptions around the problem. This resembles the goal of strategic/systemic therapy as described by Held (1986). To reduce resistance a therapist could promote the allied goals of both school and family, and to increase motivation, they suggest frankly stating the school's view of the problem and how this differs from the family's view of the problem. The family perspective of the problem is then thrown into disequilibrium which should result in the family members altering their perceptions of the problem.

With regard to families not acting upon the school counsellor's recommendation to return to her for counselling, it may be due to the "type" of problem. Braden and Sherrard (1987) suggest that, "Problems that are recognized by schools and families are more likely to result in success than referrals for problems that are recognized only by the school" (p. 513). This suggests that school counsellors must concentrate on reframing the problem so that the perceptions of the family are altered enough for them to accept that change is needed. In the situation of recommending further counselling with herself, the school counsellor may do well to use the power hierarchy as described above.

The second situation in which no impact was perceived as a result of the use of an intervention by the school counsellors was that in which they had not been using a family systems framework. In some of the cases reported the counsellors had been working on a case using a linear or individual approach and did not perceive impact. When the counsellor changed the framework with which she was conceptualizing the case to that of family systems, it was noted that change occurred quite quickly. These counsellors worked with the same problem or content. What they changed was the process of assessing the dynamics of the problem and the process of intervention. The strategy of these counsellors matches that which Held (1986) recommends. When working within a family systems framework it is important to keep the process true to systems theory, e.g. strategic/systemic processes, but the content can be drawn from any theoretical base which seems to fit with the problem.

Upon analyzing the interpersonal dynamics of the various problems presented in the cases which were reported, seven themes of problem dynamics emerged. These themes were labelled as follows: Power, Parental child, Distance, Transition, Inconsistent parenting, Anger at parent, and Manipulation. These themes were not mutually exclusive and most cases had more than one of these themes running through them. It was found that certain forms of interventions were used more often to intervene in problems with one theme than others. For example, in problems which involved the dynamics of a parental child, the counsellors sometimes reframed the problem, realigned the organizational structure of the family, or perhaps used behavior modification, but they did not try to normalize the behavior. Even though there were four interventions which were used most often (mentioned previously) it was evident that the use of certain interventions varied somewhat according to problem dynamics. This implies that not only do counsellors have to choose interventions according to what they see as effective, what they feel comfortable using, and what fits into the school setting, but they must also choose interventions which fit the dynamics of the problem.

The last set of findings deals with counsellor perceptions of family systems interventions. Here it was found that the counsellor participants believed on the whole that any intervention, even when used with the child alone, may be classified as systemic because it will have an impact in the student's family system. For example, a physical or developmental problem may not seem systemic, but when one examines the circular effects on the student and the family system, it is clear that the problem is embedded in family system interactions which can be changed.

All the counsellor participants noted that they were very comfortable using a family systems approach, and that in general teachers seemed to feel comfortable with it as well. They felt that this approach produced a more cooperative approach to problem-solving, rather than the "teachers blaming the home and the home blaming the school" type of approach. Concerning support of school administrators, the counsellors who participated in this study indicated that there was an emphasis on the part of their school administrators that the counselling focus should be on testing. Although the counsellors felt some pressure as a result of this apparent conflict of priorities, they all seemed able to cope with the priorities of the administration while still fulfilling their desire to work using a family systems framework.

There were some constraints which the counsellors felt resulted from their setting which interfered in the use of a family systems approach. The first was in getting the student's family members to come in to see the school counsellor. All of the counsellors felt more effective if they could involve other members of the child's system in the counselling process. Both Friesen (1983) and Held (1986) recommend that counsellors feel free to work at any system level which seems appropriate. The counsellors in this study did just that. They reported cases in which they worked with only the child, with the child and one parent, and various other system levels all the way up to working with three systems which were influential in the child's life. Even though the counsellors preferred to involve other members of the child's family, the constraint noted above may make it necessary for school counsellors to make some changes in the way they work. They can either extend the time frame in which they are willing to work, use the referral techniques described above so that the family will begin to see the counselling as important enough to take time for, or to begin familiarizing themselves with other forms of interventions which can be used with the child alone to create change within the family system.

The second constraint noted by the counsellors was that there was usually not an appropriate physical space to conduct family sessions within the school. A third constraint was the amount of time needed to conduct sessions with the family unit, even though the total number of sessions may be fewer than if the counsellor had been working within an individual framework.

Although these constraints all seem to indicate that working with the student on an individual basis while using a family systems framework would be the most appropriate method of working within the school system, the school counsellors who participated in this study indicated a strong preference for involving other members of the child's family system in the counselling process. This belief in the importance of involvement of other system members led counsellors to work around the constraints mentioned above. To do this, they have taken the basic philosophy and techniques of a family systems framework, and have integrated what has worked for them in the past. They have been flexible in the level of system with which they work, while still focusing on the dynamics in and around the family system. They have created a personal form of therapy, based on family systems theory, which fits their personality, their school setting, and the various problem dynamics and characteristics of the

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families with whom they work. They have managed to create this approach to fit with their role within the school, instead if simply creating an addition to their role. On top of this the counsellors in this study have generated a variety of forms of interventions within this framework which they perceive as having impact. These interventions have been classified into five categories, according to similarities in form and purpose, but each is unique because it has been generated for a specific set of problem dynamics. This renders a framework which is standard enough to be used by other school counsellors, but which will be personalized according to the characteristics of the counsellor, the setting, and the case.

Delimitations and Limitations

Delimitations of the study

There were certain things that this study could not and was not intended to achieve. The intention of this study was not to train school counsellors in the methodology of family systems theory. The intention was to take counsellors who were well versed in the family systems theory and to explore how they could apply a family systems framework in their work with students in school contexts. The intention of supplying a manual of systemic interventions to the counsellors was to provide them with ideas for creating their own interventions to use with their clients.

The purpose of the study was to explore how counsellors apply a family systems framework to their work with students, focusing on the interventions which they used which appeared to have impact. Although assessment and follow-up techniques are an integral part of family systems theory, this study was not intended to focus on these elements.

Being a descriptive study, the counsellor participants were simply asked to describe whether they perceived an impact as a result of their use of interventions within a family systems framework. The methodology did not call for quantification of impact because the goal of the study was not to measure the effects of the counsellor interventions; it was to explore the experience of the counsellor participants with the use of these interventions.

Continuing along this vein, it may be noted that others such as teachers, parents, or the students themselves were not asked to describe their perceptions of impact as a result of the counsellor interventions. The reasoning behind this was that if we are to explore how counsellors apply a family systems framework to their work it is necessary to determine/ how they use the interventions and why. Having counsellors describe their perceptions of impact of certain interventions may help us to uncover the reasons why certain interventions are or are not used.

The intention of this study was not to prove that family systems theory is effective within a school setting. It was only to explore how this approach could be applied by counsellors. The results revealed various aspects of how interventions within a family systems framework are applied in the school setting, as well as the factor that the counsellors did perceive impact on the whole, but they definitely did not provide proof that the use of this framework is effective within this setting.

As the counsellor participants used in this study were trained in the philosophy and methodology of family systems theory, the results cannot be generalized to all school counsellors. They can, however be used as guidelines in the use of a family systems framework within the school setting for those counsellors who have a background in family systems theory.

Limitations of the study

A greater length of time between the point at which the counsellor participants were asked to conceptualize their cases and the time of their individual interviews could have been given. This would be desirable because, as one of the counsellors noted, sometimes an intervention takes time to create an effect. There may have been effects resulting from the interventions which came about after the collection of data was complete.

It may have been helpful to ask the counsellors to describe cases in which no overall impact was perceived as well as those in which impact was perceived. It may have been useful to explore the dynamics of situations in which there was no success perceived in order to further delineate the description of a successful intervention.

Care must be taken in generalizing the findings of this study. The study was conducted with a certain group of people - school counsellors who have training in family systems theory. It was also aimed at a specific setting - the school. The findings cannot be generalized to all school counsellors in all settings.

Implications

Implications for practice

The practical implications of this study are that school counsellors are able to apply a family systems framework in their work with their students. The results have supplied criteria for the way in which the counsellor participants have used the family systems model, but they also act as practical guidelines for other school counsellors who have some experience with family systems theory. Other counsellors may use the fourteen forms of interventions identified in this study as a springboard for creating their own interventions personalized for their cases. They can also follow the other ways of working within a family systems framework which were illustrated by the counsellor participants such as blending a variety of interventions together within one case, using interventions which fit the dynamics of the problem, and involving various "levels" of the child's system.

Implications for training

The school counsellors who participated in this study were able to use the framework of family systems theory to guide their conceptualizations of their cases while integrating constructs from other theories which fit the problem. They were able to do this because besides possessing the training in individual models that school counsellors usually receive, they were also familiar with family systems theory. If family systems theory can be useful as a framework for school counsellors to create their own personal model of therapy which they perceive as effective, perhaps this is a theory with which all school counsellors should become familiar. The most effective method of familiarizing all school counsellors with this theory would be to provide instruction in it while the counsellors are completing their formal university training.

Implications for further research

As this study investigated only the perceptions of the counsellor participants regarding the impact of the interventions used within a family systems framework, it could prove valuable to investigate the perceptions of other significant people involved in the problem. This may involve interviewing teachers, parents, other family members, and the student him/herself. A study such as this may not only support the position that a family systems framework can be applied in the school setting, but that it is effective as perceived by most of the individuals associated with the problem.

The focus of this study was on the forms of interventions used by the school counsellors and the perceived impact as a result of these interventions. When utilizing a family systems framework, the techniques of assessment of the problem dynamics and the techniques of follow-up are also important aspects of therapy. It may be advantageous to study these two areas of family systems theory as school counsellors cannot effectively generate and administer interventions without first properly assessing the influential interactional patterns which surround the problem. Also, after administering the intervention, the family may spontaneously adapt to the change which is created, but the therapist must follow-up on the intervention to ascertain whether a positive outcome has resulted. The evaluation of interventions may prove that the intervention did not have an impact, in which case the counsellor may wish to generate another intervention or refer the client(s) to a nonschool agency.

Another study which might be of value is one that investigates referral techniques based on family systems theory. During the assessment phase of treatment the trained school counsellor will determine whether the resolution of the problem will be something which she/he can attempt, or whether it may be something which requires more indepth treatment than can be given within the school setting. It would be interesting to try and implement the model suggested by Braden and Sherrard (1987), using a family systems approach in referring families to nonschool agencies to determine whether the percentage of families who fail to act upon referrals is less than the 20 to 50% noted by Conti (1975) and Zins and Hopkins (1981) (in Braden & Sherrard, 1987). It would also be of interest to determine whether the number of families who fail to remain in treatment beyond the initial appointment would be less as a result of using this method of referral.

Recommendations

Based on the results of this study, the following recommendations are given:

1) That school counsellors receive instruction in the philosophy and techniques of the family systems model during their formal university training. The instruction should be such that it gives the counsellors a framework to work within, but it does not require that they abandon all the traditional constructs and techniques with which they have become familiar. Counsellors should be encouraged not to be rigid in their adherence to the constructs of a certain theory.

2) That counsellors who have already completed their training in school psychology receive inservice training in the principles, philosophy, and techniques of family systems theory. They could be given leave from their school district to attend conferences and workshops, they could attend

evening or summer classes, or the school system itself could provide inservice training for its counsellors in this area. This would allow them the freedom to apply a family systems framework to their work with students if they feel comfortable with it.

3) It would be helpful for school counsellors to be able to receive feedback from others in relation to their experience with implementing a family systems framework in their work. For this purpose it would be beneficial if the school system provided a certain number of days within the school year for the counsellors to meet and discuss their cases. They could offer suggestions and give feedback, similar to what was done in the group meetings at the commencement of this study. It would also be very helpful for the counsellors to have a consultant trained in family systems theory who would be available to meet with each counsellor whenever help was needed.

4) School counsellors might find it easier to work on cases within a family systems framework if they felt full support from the school staff and administration. It is recommended that teachers and administrators become familiar with the principles of family systems theory so that the school staff is coordinated and interactions are positive and effective, rather than confused and inhibiting. The school counsellor could bring in an expert on family systems theory to speak at a staff meeting or school inservice day, or he/she could train the staff him/herself if he/she felt comfortable enough with the material.

5) It is recommended that school counsellors become aware of the principles, philosophy, and techniques of family systems theory, but that they do not abandon ideologies that have been effective for them in the past. They must also not adhere to ideologies that do not fit their own personalities, the characteristics of their cases, and the expectations of the system in which they

work. It is recommended that school counsellors use a family systems framework in their work with students if they feel comfortable with it, and that they make the model a personal one by integrating all the aspects which will make it effective for them.

Concluding Statement

As the structure of society changes, so must the role of the school counsellor. There is increasing belief on the part of school counsellors and increasing evidence in the research that many emotional and behavioral problems which are exhibited by students in the school setting are embedded in dysfunctional interaction patterns within the family system. As a result, school counsellors are no longer feeling effective in helping students to plan careers, providing testing, and showing empathy to those who have personal problems. There seems to be a need for a model through which school counsellors can feel effective in creating impact within the dynamics of the family, the most influential system in the student's life.

Family systems theory has been suggested as a possible framework within which school counsellors can work. The purpose of this study was to explore how school counsellors can apply a family systems framework to their work with students. The critical incident technique allowed an indepth look at the factors which contribute to the use of a family systems framework by the counsellor participants.

It was found that while the counsellor participants conceptualized the reported cases within a family systems framework, they did not use only those interventions usually associated with family systems theory. They tended to integrate concepts and methods from other theories, including those traditionally thought of as "linear". This integration was conducted within the philosophy of family systems theory, that is to produce change in the interaction patterns of the family system. It was also found that the counsellor participants worked at the system "level" which was appropriate for each case, instead of working only with the student. On the whole, the counsellors who participated in this study were able to adapt the family systems model to their work within the school setting in the following way: by taking into account the setting within which they were working, the characteristics of the problem and the families with whom they worked, their own personality, and by not abandoning ideas and methodologies that had been found effective in the past. As a result, they counsellors perceive working within a family systems framework as having impact within the family system, and upon the presenting problem as it was manifested in the school context.

It was shown through this study a family systems framework can be applied by school counsellors in their work with students. A variety of interventions were generated within this study. As most of these interventions appeared to have impact upon the family dynamics around the problem, they may serve as models from which other school counsellors can generate interventions for their own school cases. When generating interventions, the dynamics of the problem and the constraints of the setting must be taken into account.

It may be advantageous for all school counsellors to become familiar with family systems theory, as well as the other theories usually taught as part of their university training. In this way, the school counsellor can bridge the gap between family and school. In facilitating problem-resolution which involves the student's family system, the counsellor accesses the system which is most influential in a child's emotional development. This may not only help counsellors to feel more effective in problem-resolution, but may also serve to enrich the child's formal educational experience by making the school and family system conscious partners in that child's development.

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APPENDIX A

CRITICAL INCIDENTS INTERVIEW GUIDE

CRITICAL INCIDENTS INTERVIEW GUIDE

The Use of Family Systems Interventions Which Appear to Have Impact by School Counsellors

Establishing the Aim

Focus:

Please focus on your experience with the use of systemic interventions with students in your school setting.

Systemic Intervention Criteria Check:

What type of systemic interventions come to your mind when you think about systemic counselling?

Context:

What criteria did you use in order to determine whether to use systemic interventions with a client?

How did you feel about using systemic interventions?

The Critical Incident

Incident:

Please describe one incident, the details of which come readily to your mind, in which you used a systemic intervention with a student.

Is there another incident that comes to mind for you?
(Search for additional incidents)

Effect of Incident Criteria Checks:

Did you perceive an impact as a result of the use of the systemic intervention(s)?

What things led you to believe that there was (was not) an impact?

What things led you to believe that the impact was a result of the systemic intervention(s)?

Did the use of systemic interventions affect the relationships between the family members? How?

How did you assess the effect of the intervention(s)?
(student reports, teacher reports, parent reports, observation, etc.)

Did others perceive impact?

Additional Information to Clarify Incident:

Who was the identified patient in relation to the family?

Who made the referral?

What was the reason for referral?
(problem/symptoms)

What were the family interaction patterns around the problem?

What were the relationships like between family members?

How many times was contact made with the family (or parents)?

At what points in the case was contact made with the family (or parents)?

How many times did you see the student?

During which session(s) did you use the systemic intervention(s)?

How did other concerned parties (teachers, parents, etc.) react to the use of the intervention(s)?

APPENDIX B

CLASSIFICATION OF INTERVENTIONS

CLASSIFICATION OF INTERVENTION

BY CATEGORY

A) Family Systems Interventions

1. Joining

Transcript #	Case #	Intervention #
1	1	1
1	1	12
1	2	1
1	1	4
2	1	2
2	1	6
2	1	9
2	2	1
2	2	2
2	2	5
2	5	1
2	5	2
2	5	9
4	1	3
4	2	3
5	4	5
5	4	6

2. Reframing the Symptomatic Behavior

Transcript #	Case #	Intervention #
1	1	9
1	2	18
1	2	22
2	1	3

Reframing

Transcript #	Case #	Intervention #
2	1	10
2	2	3
2	2	7
2	3	7
2	4	6
2	5	5
2	5	13
3	1	2
3	1	3
3	2	3
4	1	1
4	1	5
4	2	1

3. Realigning Organizational Structure

Transcript #	Case #	Intervention #
1	1	4
1	1	5
1	1	10
1	2	10
1	2	14
1	2	16
2	2	6
2	3	4
2	3	5
2	3	6
2	4	5
2	5	6
2	5	7
2	5	8
2	5	14
3	2	1

Realigning

Transcript #	Case #	Intervention #
4	1	2
4	1	9
4	3	1
5	1	1
5	1	4
5	2	3
5	4	1
5	4	2

3. Clarifying the Dysfunctional Dynamics

Transcript #	Case #	Intervention #
1	1	11
1	2	3
1	2	6
1	2	8
1	2	13
1	2	15
1	2	19
1	2	20
1	2	21
2	1	5
2	2	4
2	3	8
2	3	10
2	4	7
2	5	3
3	2	4
3	2	5
5	1	2
5	1	3
5	2	1
5	2	2

Clarifying

Transcript #	Case #	Intervention #
5	2	4

5. **Logical Extension Statements**

Transcript #	Case #	Intervention #
1	2	5
1	2	9

6. **Taking a One-Down Position**

Transcript #	Case #	Intervention #
1	1	13
1	2	12

7. **Suggesting Continued Symptomatic Behavior**

Transcript #	Case #	Intervention #
2	3	9
2	4	1
3	1	2
3	2	2

8. **Assessing Changes That Are Safe**

Transcript #	Case #	Intervention #
3	1	5

B) Enhancing Collaboration Between Systems

Transcript #	Case #	Intervention #
2	1	1
2	1	4

Enhancing

Transcript #	Case #	Intervention #
2	1	7
2	1	8
2	1	11
5	2	5

C) Recommending Further Counselling

Transcript #	Case #	Intervention #
1	1	2
1	2	17
2	3	2
2	3	3
2	4	2
2	4	3
2	5	4
4	1	4
4	2	2
5	1	5

D) Teaching

1. Teaching Parenting Skills

Transcript #	Case #	Intervention #
1	1	6
2	4	4
2	5	10
4	1	6
4	1	7

2. Teaching Communication Skills

Transcript #	Case #	Intervention #
1	2	7
2	3	1

3. Normalizing the Problem

Transcript #	Case #	Intervention #
1	2	2
1	2	11
2	2	8
2	5	11
2	5	12

E) Bevahior Modification

Transcript #	Case #	Intervention #
1	1	3
1	1	7
1	1	8
1	1	14
4	1	8
5	4	3

CLASSIFICATION OF INTERVENTION
BY TRANSCRIPT

Transcript #1

Case #1

Intervention #1: Joining
Intervention #2: Recommending Counselling
Intervention #3: Behavior Modification
Intervention #4: Realigning Structure
Intervention #5: Realigning Structure
Intervention #6: Parenting Skills
Intervention #7: Behavior Modifcation
Intervention #8: Behavior Modification
Intervention #9: Reframing
Intervention #10: Realigning Structure
Intervention #11: Clarifying
Intervention #12: Joining
Intervention #13: One-Down Position
Intervention #14: Behavior Modification

Case #2

Intervention #1: Joining
Intervention #2: Normalizing
Intervention #3: Clarifying
Intervention #4: Joining
Intervention #5: Logical Extension
Intervention #6: Clarifying
Intervention #7: Communication
Intervention #8: Clarifying
Intervention #9: Logical Extension
Intervention #10: Realigning Structure
Intervention #11: Normalizing
Intervention #12: One-Down Position
Intervention #13: Clarifying
Intervention #14: Realigning Structure
Intervention #15: Clarifying
Intervention #16: Realigning Structure
Intervention #17: Recommending Counselling
Intervention #18: Reframing
Intervention #19: Clarifying
Intervention #20: Clarifying
Intervention #21: Clarifying
Intervention #22: Reframing

Transcript #2

Case #1

Intervention #1: Enhancing Collaboration
Intervention #2: Joining
Intervention #3: Reframing
Intervention #4: Enhancing Collaboration
Intervention #5: Joining
Intervention #6: Clarifying
Intervention #7: Enhancing Collaboration
Intervention #8: Enhancing Collaboration
Intervention #9: Joining
Intervention #10: Reframing
Intervention #11: Enhancing Collaboration

Case #2

Intervention #1: Joining
Intervention #2: Joining
Intervention #3: Reframing
Intervention #4: Clarifying
Intervention #5: Joining
Intervention #6: Realigning Structure
Intervention #7: Reframing
Intervention #8: Normalizing

Case #3

Intervention #1: Communication
Intervention #2: Recommending Counselling
Intervention #3: Recommending Counselling
Intervention #4: Realigning Structure
Intervention #5: Realigning Structure
Intervention #6: Realigning Structure
Intervention #7: Reframing
Intervention #8: Clarifying
Intervention #9: Continuing Symptom
Intervention #10: Clarifying

Case #4

Intervention #1: Continuing Symptom
Intervention #2: Recommending Counselling
Intervention #3: Recommending Counselling
Intervention #4: Parenting Skills

Intervention #5: Realigning Structure
Intervention #6: Reframing
Intervention #7: Clarifying

Case #5

Intervention #1: Joining
Intervention #2: Joining
Intervention #3: Clarifying
Intervention #4: Recommending Counselling
Intervention #5: Reframing
Intervention #6: Realigning Structure
Intervention #7: Realigning Structure
Intervention #8: Realigning Structure
Intervention #9: Joining
Intervention #10: Parenting Skills
Intervention #11: Normalizing
Intervention #12: Normalizing
Intervention #13: Reframing
Intervention #14: Realigning Structure

Transcript #3

Case #1

Intervention #1: Continuing Symptom
Intervention #2: Reframing
Intervention #3: Reframing
Intervention #4: Assessing Changes

Case #2

Intervention #1: Realigning Structure
Intervention #2: Continuing Symptom
Intervention #3: Reframing
Intervention #4: Clarifying
Intervention #5: Clarifying

Transcript #4

Case #1

Intervention #1: Reframing
Intervention #2: Realigning Structure
Intervention #3: Joining
Intervention #4: Recommending Counselling
Intervention #5: Reframing
Intervention #6: Parenting Skills
Intervention #7: Parenting Skills

Intervention #8: Behavior Modification
Intervention #9: Realigning Structure

Case #2

Intervention #1: Reframing
Intervention #2: Recommending Counselling
Intervention #3: Joining

Case #3

Intervention #1: Realigning Structure

Transcript #5

Case #1

Intervention #1: Realigning Structure
Intervention #2: Clarifying
Intervention #3: Clarifying
Intervention #4: Clarifying
Intervention #5: Recommending Counselling

Case #2

Intervention #1: Clarifying
Intervention #2: Clarifying
Intervention #3: Realigning Structure
Intervention #4: Clarifying
Intervention #5: Enhancing Collaboration

Case #3

Intervention #1: Realigning Structure
Intervention #2: Realigning Structure
Intervention #3: Behavior Modification
Intervention #4: Behavior Modification
Intervention #5: Joining
Intervention #6: Joining

APPENDIX C

DESCRIPTION OF INTERVENTION CATEGORIES

A) Joining May include sympathizing, empathizing, or affirming.

B) Reframing the Symptomatic Behavior The counsellor offers a different view of a problem behavior, whether it be of the identified patient, or another family member.

C) Realigning the Organizational Structure of the Family This intervention includes giving suggestions which are aimed at creating more or less emotional or physical space between family members. It may also be called redefining the boundaries of the system. The suggestions may also serve to give more or less power to different family members or subsystems.

D) Clarifying the Dysfunctional Dynamics The counsellor either verbalizes the dysfunctional patterns or family interaction, or helps a family member to clarify them through talking, using puppets, drawing, etc..

E) Logical Extension Statements The counsellor accepts the client's point of view but also adds a new view based on the client's in order to get him/her to view the problem in a new light.

F) Taking a One-Down Position The counsellor helps the client to feel relaxed and to be more cooperative by taking a one-down position. The counsellor may use his/her manner or speech to help the client not to feel inferior. He/she may also be helping to empower the client.

G) Suggesting Continued Symptomatic Behavior The counsellor may suggest that the client actually plan the occurrence of a symptomatic behavior.

This may indirectly help the client gain control over the symptom, learning how to start and stop it.

H) Assessing Changes That are Safe This includes exploring with the client potential dangers of improvement.

I) Enhancing Collaboration Between Systems The interaction patterns between the family and other systems are examined and the counsellor tries to improve the dynamics between these systems in order to produce a positive impact in the problematic situation.

J) Recommending Further Counselling The counsellor recommends that the client/family seek further help from him/herself or from a nonschool agency.

K) Teaching Parenting Skills The use of this intervention may include such things as helping parents to learn how to set rules, bring consistency to parenting and other skills. The counsellor may provide information through talking to the parent, recommending books, or other sources of information.

L) Teaching Communication In order to help the client and his/her family deal more effectively with feelings the counsellor may teach an affective communication model or techniques to one or more family members.

M) Normalizing the Problem The counsellor helps reduce the client's anxiety around a problem by helping to explain it or by providing information about the problem.

N) Behavior Modification The child receives reinforcements such as points, stars, rewards, etc. for changing his/her behavior appropriately.

INTERVENTION CLASSIFICATION FORM

	Intervention Number	Intervention Letter
Case #1		
	#1	______
	#2	______
	#3	______
	#4	______
Case #2		
	#1	______
	#2	______
	#3	______
	#4	______
	#5	______
Case #3		
	#1	______
	#2	______
	#3	______